

# PHAPlans

5YearPlanforFiscalYears2002 -2006  
AnnualPlanforFiscalYear2002

**NOTE:THISPHAPLANSTEMPLATE(HUD50075)ISTOBE COMPLETEDIN  
ACCORDANCEWITHINSTRUCTIONSLOCATEDINAPPLICABLEPIHNOTICES**

## **PHA Plan Agency Identification**

**PHAName:** YonkersMunicipalHousingAuthority

**PHANumber:** NY003

**PHAFiscalYearBeginning:(07/2002)**

### **Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting:(select all that apply)**

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

### **Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☐ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

**5-YEAR PLAN**  
**PHAF ISCAL YEARS 2002 -2006**  
[24CFRPart903.5]

**A.Mission**

State the PHA's mission for serving the needs of low -income, very low income, and extremely low -income families in the PHA's jurisdiction. (select one of the choices below)

- ☒ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- ☐ The PHA's mission is: (state mission here)

**B.Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHA may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD -suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include target sets such as: numbers of families served or PHA scores achieved.) PHA should identify these measures in the space to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- ☒ PHA Goal: Expand the supply of assisted housing  
Objectives:
- ☐ Apply for additional rental vouchers:
  - ☒ Reduce public housing vacancies:
  - ☒ Leverage private or other public funds to create additional housing opportunities:
  - ☐ Acquire or build units or developments
  - ☒ Other (list below)  
Provide Mortgages for residents
- ☒ PHA Goal: Improve the quality of assisted housing  
Objectives:
- ☒ Improve public housing management: (PHA Score)
  - ☒ Improve voucher management: (SEMA Score)
  - ☒ Increase customer satisfaction:
  - ☐ Concentrate one effort to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- ☒ Renovate or modernize public housing units:
- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☐ Provide replacement vouchers:
- ☐ Other: (list below)

- ☒ PHA Goal: Increase assisted housing choices  
Objectives:
  - ☒ Provide voucher mobility counseling:
  - ☒ Conduct outreach effort to potential voucher landlords
  - ☐ Increase voucher payment standards
  - ☐ Implement voucher homeownership program:
  - ☐ Implement public housing or other homeownership programs:
  - ☐ Implement public housing site -based waiting lists:
  - ☐ Convert public housing to vouchers:
  - ☐ Other: (list below)

#### **HUD Strategic Goal: Improve community quality of life and economic vitality**

- ☒ PHA Goal: Provide an improved living environment  
Objectives:
  - ☒ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
  - ☒ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - ☒ Implement public housing security improvements:
  - ☒ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
  - ☐ Other: (list below)

#### **HUD Strategic Goal: Promote self -sufficiency and asset development of families and individuals**

- ☒ PHA Goal: Promote self -sufficiency and asset development of assisted households  
Objectives:
  - ☐ Increase the number and percentage of employed persons in assisted families:
  - ☒ Provide or attract supportive services to improve assistance recipients' employability:

- ☒ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
  - ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:
  - ☒ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability:
  - ☐ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - ☐ Other: (list below)

**Other PHA Goals and Objectives: (list below)**

**AnnualPHAPlan**  
**PHAFiscalYear2002**  
[24CFRPart903.7]

**i. AnnualPlanType:**

Select which type of Annual Plan the PHA will submit.

☒ **Standard Plan**

**Streamlined Plan:**

- ☐ **High Performing PHA**
- ☐ **Small Agency (<250 Public Housing Units)**
- ☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24CFRPart903.79(r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Yonkers Municipal Housing Authority is a large PHMAP Standard-Performer agency located in Westchester County, New York. The YMHA manages 2609 units of public housing at eleven developments.

The mission of the YMHA:

The Yonkers Municipal Housing Authority is committed to promoting adequate and affordable housing without discrimination for low-income, very low-income families, persons with disabilities or the elderly.

The YMHA will accomplish its mission ideals through its goals and objectives:

- A. Providing decent, safe and affordable housing in your community.
- B. Ensuring equal opportunity in housing for everyone
- C. Promoting self-sufficiency and asset development of financially disadvantaged families and individuals.
- D. Increase resident participation through resident council and/or advisory committee.
- E. To provide timely response to residents' request for maintenance problems.
- F. To continue to enforce our "One Strike" policies for resident and applicants.
- G. To improve and/or maintain our financial stability through aggressive rent collections and improved reserve position

The YMHA's financial resources include an operating fund, capital fund, dwelling rental income and Section 8 Administrative fees which will be used to operate the agency in the most cost effective means possible and still provide the services and activities for its residents.

The YMHA has assessed the housing needs of Yonkers and surrounding Westchester

County area and has determined that it is currently and will continue to meet the housing needs of the community to the extent practical for a large agency. The YMHA has approved a Deconcentration Policy and will utilize Local Preferences to attract and encourage applicants that can qualify for public housing. The YMHA has determined that its housing strategy complies with the city of Yonker's Consolidated Plan.

The YMHA has updated and rewritten its Admissions and Continued Occupancy Plan, Dwelling Lease and Grievance procedures to comply with all QHWRA requirements. The YMHA has established a minimum rent of \$50.00 and elected to determine ceiling rents at operating cost plus debt service and flat rents through a rent reasonableness study to determine its dollar value.

The YMHA has conducted a physical needs assessment to determine its modernization requirements and has developed an Annual and 5 year Action Plan to address its Capital Improvements.

The YMHA has identified compliance with the Community Service requirements by rewriting its Admission and Continued Occupancy Plan and Dwelling lease to address those adult members of any family whom must perform community service activities annually. However, in response to HUD notification YMHA has suspended those requirements a part of the annual recertification process for FY 2002. In addition, the YMHA has developed a self-certification form that is enclosed.

The YMHA has no plans to demolish or dispose of any of its properties. The YMHA has jointly addressed with the local police department to develop safety and crime prevention that adequately meets the needs of its residents.

The YMHA has developed an agency wide Pet Policy that allows any family to have a pet if they follow a set of rules.

The YMHA has certified that it has and will continue to adhere to all Civil Rights requirements and will affirmatively further fair housing in addition, the YMHA has included a copy of its most recent fiscal year audit reports as part of the documentation made available for public review during the 45 days prior to submission of YMHA's Agency Plan to HUD on April 17, 2002.

The YMHA has developed a very effective Asset Management plan to maintain it's properties and manage its. Operation through the proper utilization of the following Annual Plan components:

- Financial Resources
- Operations and Management
- Capital Improvements

### **iii. AnnualPlanTableofContents**

[24CFRPart903.79(r)]

ProvideatableofcontentsfortheAnnualPlan ,includingattachments,andalistofsupportingdocuments availableforpublicinspection .

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### Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the filename in parentheses in the space to the right of the title.

#### Required Attachments:

<input checked="" type="checkbox"/> (A) Admissions Policy for Deconcentration	46
<input checked="" type="checkbox"/> (B) FY 2002 Capital Fund Program Annual Statement	47
<input type="checkbox"/> Most recent board -approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)	

#### Optional Attachments:

<input checked="" type="checkbox"/> (C) PHA Management Organizational Chart	64
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<input type="checkbox"/> Public Housing Drug Elimination Program (PHDEP) Plan	
<input type="checkbox"/> Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)	
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## Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
YES	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
YES	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
YES	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
YES	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
YES	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources;
YES	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certification of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
YES	Schedule of flat rents offered each public housing development <input checked="" type="checkbox"/> check here if included in the public housing	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	A&O Policy	
YES	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
YES	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
YES	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
YES	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
YES	The HUD - approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
YES	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
YES	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
YES	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
YES	Policies governing any Section 8 Homeownership program <input checked="" type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
YES	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
YES	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
YES	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1415(h)(2))	Annual Plan: Annual Audit

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
YES	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## **1. Statement of Housing Needs**

[24 CFR Part 903.79(a)]

### **A. Housing Needs of Families in the Jurisdiction/s Served by the PHA**

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income ≤ 30% of AMI	1705	5	5	5	3	3	2
Income > 30% but ≤ 50% of AMI	1655	5	5	5	3	3	2
Income > 50% but < 80% of AMI	1655	4	4	4	3	3	2
Elderly	652	5	5	4	3	2	4
Families with Disabilities	702	5	5	4	4	3	5
Race/Ethnicity W	702	5	5	5	3	3	2
Race/Ethnicity B	1956	5	5	5	3	3	2
Race/Ethnicity H	2307	5	5	5	3	3	2
Race/Ethnicity A	50	5	5	5	3	3	2

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s  
Indicate year: 1996 -2000
- ☒ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset 1991
- ☐ American Housing Survey data  
Indicate year:
- ☐ Other housing market study  
Indicate year:
- ☐ Other sources: (list and indicate year of information)

## B. Housing Need of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Need of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	1,498		239
Extremely low income <= 30% AMI	482	32.2	
Very low income (> 30% but <= 50% AMI)	515	34.4	
Low income (> 50% but < 80% AMI)	501	33.4	
Families with children	826	55.1	
Elderly families	147	9.8	
Families with Disabilities	152	10.1	
Race/ethnicity W	130	8.7	
Race/ethnicity B	678	45.3	
Race/ethnicity H	677	45.2	

HousingNeedsofFamiliesontheWaitingList			
Race/ethnicity A	13	0.8	
Characteristicsby BedroomSize (PublicHousing Only)			
1BR	470	31.4	75
2BR	566	37.8	90
3BR	385	25.7	61
4BR	77	5.1	13
5BR			
5+BR			
Isthewaitinglistclosed(selectone)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Ifyes: Howlonghasitbeenclosed(#ofmonths)?4months DoesthePHAexpecttoreopentheListinthePHAPlanyear? <input type="checkbox"/> No <input type="checkbox"/> Yes DoesthePHApermitspecificcategoriesoffamiliesontothewaitinglist,evenif generallyclosed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

HousingNeedsofFamiliesontheWaitingList			
Waitinglisttype:(selectone) <input checked="" type="checkbox"/> Section8tenant -basedassistance <input type="checkbox"/> PublicHousing <input type="checkbox"/> CombinedSection8andPublicHousing <input type="checkbox"/> PublicHousingSite -Basedorsub -jurisdictionalwaiting list(optional) Ifused,identifywhichdevelopment/subjurisdiction:			
	#offamilies	%oftotalfamilies	AnnualTurnover
Waitinglisttotal	3426		301
Extremelylow income<=30%AMI	1185	34.6	
Verylowincome (>30%but<=50% AMI)	1124	32.8	
Lowincome (>50%but<80% AMI)	1117	32.6	
Familieswith children	2230	65.1	
Elderlyfamilies	472	14	
Familieswith Disabilities	524	15	

Housing Needs of Families on the Waiting List			
Race/ethnicity	W	543	16
Race/ethnicity	B	1251	37
Race/ethnicity	H	1601	46.6
Race/ethnicity	A	31	0.4
Characteristics by Bedroom Size (Public Housing Only)			
1BR		N/A	
2BR			
3BR			
4BR			
5BR			
5+BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes: How long has it been closed (# of months)? 4 years 6 months Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

**Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ Reduce turnover time for vacated public housing units
- ☒ Reduce time to renovate public housing units
- ☐ Seek replacement of public housing units lost to the inventory through mixed financed development
- ☒ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources

- ☐ Maintain or increase section 8 lease -uprates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☒ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☐ Maintain or increase section 8 lease -uprates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☒ Maintain or increase section 8 lease -uprates by effectively screening Section 8 applicants to increase owner acceptance of program
- ☒ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ☐ Other (list below)

**Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

- ☐ Apply for additional section 8 units should they become available
- ☒ Leverage affordable housing resources in the community through the creation of mixed -finance housing
- ☒ Pursue housing resources other than public housing or Section 8 tenant -based assistance.
- ☐ Other: (list below)

**Need: Specific Family Types: Families at or below 30% of median**

**Strategy 1: Target available assistance to families at or below 30% of AMI**

Select all that apply

- ☒ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- ☒ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant -based section 8 assistance
- ☒ Employ admissions preferences aimed at families with economic hardships
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

**Need: Specific Family Types: Families at or below 50% of median**

**Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

- ☒ Employ admissions preferences aimed at families who are working
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

## **Need: Specific Family Types: The Elderly**

### **Strategy 1: Target available assistance to the elderly:**

Select all that apply

- ☒ Seek designation of public housing for the elderly
- ☒ Apply for special -purpose voucher targeted to the elderly, should they become available
- ☐ Other: (list below)

## **Need: Specific Family Types: Families with Disabilities**

### **Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- ☐ Seek designation of public housing for families with disabilities
- ☒ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☒ Apply for special -purpose voucher targeted to families with disabilities, should they become available
- ☒ Affirmatively market to local non -profit agencies that assist families with disabilities
- ☐ Other: (list below)

## **Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

### **Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- ☒ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- ☐ Other: (list below)

### **Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- ☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☒ Market the section 8 program to owners outside of areas of poverty/minority concentrations
- ☐ Other: (list below)

## **Other Housing Needs & Strategies: (list needs and strategies below)**



## **(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's election of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☐ Limited availability of sites for assisted housing
- ☒ Extent to which particular housing needs are met by other organizations in the community
- ☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☐ Influence of the housing market on PHA programs
- ☐ Community priorities regarding housing assistance
- ☒ Results of consultation with local or state government
- ☒ Results of consultation with residents and the Resident Advisory Board
- ☒ Results of consultation with advocacy groups
- ☐ Other: (list below)

## **2. Statement of Financial Resources**

[24CFR Part 903.79(b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant-based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing support services, Section 8 tenant-based assistance, Section 8 support services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2002 grants)</b>		
a) Public Housing Operating Fund	5,882,715	
b) Public Housing Capital Fund	6,578,129	
c) HOPEVI Revitalization	N/A	
d) HOPEVI Demolition	N/A	
e) Annual Contributions for Section 8 Tenant-Based Assistance	11,045,550	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
Other Federal Grants (list below)		
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
2001 Capital Fund	2,678,129	
<b>3. Public Housing Dwelling Rental Income</b>	8,434,956	
<b>4. Other income (list below)</b>		
Excess Utilities	87,202	
Interest	186,220	
<b>5. Non -federal sources (list below)</b>		
<b>Total resources</b>	34,892,901	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24CFR Part 903.79(c)]

#### **A. Public Housing**

Exemptions: PHA that do not administer public housing are not required to complete subcomponent 3A.

##### **(1) Eligibility**

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- ☐ When families are within a certain number of being offered a unit: (state number)
- ☒ When families are within a certain time of being offered a unit: (6 months)
- ☐ Other: (describe)

b. Which non -income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- ☒ Criminal or Drug -related activity
- ☒ Rental history

- ☒ Housekeeping  
☐ Other(describe)

- c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC - authorized source)

## **(2) Waiting List Organization**

- a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- ☒ Community-wide list  
☐ Sub-jurisdictional lists  
☐ Site-based waiting lists  
☐ Other (describe)

- b. Where may interested persons apply for admission to public housing?

- ☒ PHA main administrative office  
☐ PHA development site management office  
☐ Other (list below)

- c. If the PHA plan to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?

2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously approved site-based waiting list plan)? If yes, how many lists?

3. ☐ Yes ☐ No: May families be on more than one list simultaneously? If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- ☒ PHA main administrative office  
☐ All PHA development management offices  
☐ Management offices at developments with site-based waiting lists  
☐ At the development to which they would like to apply

☐ Other(listbelow)

**(3)Assignment**

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of a roster removed from the waiting list?(select one)

- ☐ One  
☒ Two  
☐ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

**(4)AdmissionsPreferences**

a. Income targeting:

☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfer take precedence over new admissions?(list below)

- ☒ Emergencies  
☐ Overhoused  
☒ Underhoused  
☒ Medical justification  
☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)  
☐ Resident choice: (state circumstances below)  
☐ Other: (list below)

c. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5)Occupancy** )

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☒ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☒ Victims of domestic violence
- ☒ Substandard housing
- ☒ Homelessness
- ☒ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☒ Working families and those unable to work because of age or disability
- ☒ Veterans and veterans' families
- ☒ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☒ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

1 Date and Time

Former Federal preferences:

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 1 Victims of domestic violence
- 1 Substandard housing
- 1 Homelessness
- 1 High rent burden

Other preferences (select all that apply)

- ☒ 1 Working families and those unable to work because of age or disability
- ☒ 1 Veterans and veterans' families
- ☒ 1 Residents who live and/or work in the jurisdiction
- ☒ 1 Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☒ 1 Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- ☐ The PHA applies preferences within income tiers
- ☒ Not applicable: the pool of applicant families ensure that the PHA will meet income targeting requirements

**(5) Occupancy**

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- ☒ The PHA - resident lease
- ☒ The PHA's Admissions and (Continued) Occupancy policy
- ☒ PHA briefing seminars or written materials
- ☒ Other source ( list ) Screening Committee

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- ☒ At an annual reexamination and lease renewal
- ☐ Anytime family composition changes
- ☒ At family request for revision
- ☐ Other (list)

**(6) Deconcentration and Income Mixing**

a. ☒ Yes ☐ No: Did the PHA's analysis of its family (general occupancy) development to determine concentration of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. ☐ Yes ☒ No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- ☐ Adoption of site based waiting lists  
If selected, list targeted developments below:
- ☐ Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:

☐ Employing new admission preferences at targeted developments  
If selected, list targeted developments below:

☐ Other (list policies and development targeted below)

d. ☐ Yes ☒ No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- ☐ Additional affirmative marketing
- ☐ Actions to improve the marketability of certain developments
- ☐ Adoption or adjustment of ceiling rents for certain developments
- ☐ Adoption of rent incentives to encourage deconcentration of poverty and income mixing
- ☐ Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher -income families? (select all that apply)

- ☐ Not applicable: results of analysis did not indicate a need for such efforts
- ☐ List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower -income families? (select all that apply)

- ☐ Not applicable: results of analysis did not indicate a need for such efforts
- ☐ List (any applicable) developments below:

## B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub -component 3B.  
**Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### (1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

- ☒ Criminal or drug -related activity only to the extent required by law or regulation
- ☒ Criminal and drug -related activity, more extensively than required by law or regulation
- ☐ More general screening than criminal and drug -related activity (list factors below)
- ☐ Other (list below)

b. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC - authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

- ☒ Criminal or drug -related activity  
☐ Other (describe below)

### **(2) Waiting List Organization**

a. With which of the following program waiting lists is the section 8 tenant -based assistance waiting list merged? (select all that apply)

- ☒ None  
☐ Federal public housing  
☐ Federal moderate rehabilitation  
☐ Federal project -based certificate program  
☐ Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant -based assistance? (select all that apply)

- ☒ PHA main administrative office  
☐ Other (list below)

### **(3) Search Time**

a. ☐ Yes ☒ No: Does the PHA give extensions on standard 60 -day period to search for a unit?

If yes, state circumstances below:

### **(4) Admissions Preferences**

a. Income targeting



☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissionsto the section 8 program of families at or below 30% of median area income?

b. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- ☒ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☒ Victims of domestic violence
- ☒ Substandard housing
- ☒ Homelessness
- ☒ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☒ Working families and those unable to work because of age or disability
- ☒ Veterans and veterans' families
- ☒ Residents who live and/or work in your jurisdiction
- ☒ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Household that contribute to meeting income goals (broad range of incomes)
- ☐ Household that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☒ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a points system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 1 Victims of domestic violence
- 1 Substandard housing
- 1 Homelessness

1 Highrentburden

Other preferences (select all that apply)

- ☒ 1 Working families and those unable to work because of age or disability
- ☒ 1 Veterans and veterans' families
- ☒ 1 Residents who live and/or work in your jurisdiction
- ☒ 1 Those enrolled currently in educational, training, or upward mobility programs
- ☐ Household that contributes to meeting income goals (broad range of incomes)
- ☐ Household that contributes to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☒ 1 Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with the equal preference status, how are applicants selected? (select one)

- ☒ Date and time of application
- ☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)

- ☒ This preference has previously been reviewed and approved by HUD
- ☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- ☒ The PHA applies preferences within income tiers
- ☐ Not applicable: the pool of applicant families ensure that the PHA will meet income targeting requirements

**(5) Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility selection, and admission to any special -purpose section 8 program administered by the PHA contained? (select all that apply)

- ☒ The Section 8 Administrative Plan
- ☒ Briefing sessions and written materials
- ☐ Other (list below)

b. How does the PHA announce the availability of any special -purpose section 8 program to the public?

- ☒ Through published notices

☐ Other(listbelow)

#### **4.PHARentDeterminationPolicies**

[24CFRPart9 03.79(d)]

##### **A.PublicHousing**

Exemptions:PHAthatdonotadministerpublichousingarenotrequiredto completesub -component4A.

##### **(1)IncomeBasedRentPolicies**

Describe thePHA's incomebasedrentsettingpolicy/iesforpublichousingusing,includingdiscretionary (thatis,notrequiredbystatuteorregulation) incomedisregardsandexclusions,intheappropriatespaces below.

a.Useofdiscretionarypolicies:(selectone)

☐ ThePHAwillnotemployanydiscretionaryrent -settingpoliciesforincomebased rentinpublichousing.Income -basedrentsaresetatthehigherof30%of adjustedmonthlyincome,10%ofunadjustedmonthlyincome,thewelfarerent,or minimumrent(lessHUDmandatorydeductionsandexclusions).(Ifselected, skiptosub -component(2))

---or---

☒ ThePHAemploysdiscretionarypoliciesfordeterminingincomebasedrent(If selected,continuetquestionb.)

b.MinimumRent

1.WhatamountbestreflectsthePHA'sminimumrent?(selectone)

- ☐ \$0  
☐ \$1-\$25  
☒ \$26-\$50

2. ☐ Yes ☒ No:Has thePHAadoptedanydiscretionaryminimumrenthardship exemptionpolicies?

3.If yestoquestion2,listthesepoliciesbelow :

c. Rentssetatlessthan30%thanadjustedincome

1. ☐ Yes ☒ No:DoesthePHAplantochargerentsatafixedamountor percentagelessthan30%ofadjustedincome?

2.If yesto above, list the amounts or percent                      ages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- ☐ For the earned income of a previously unemployed household member
- ☐ For increases in earned income
- ☐ Fixed amount (other than general rent    -setting policy)  
If yes, state amount/s and circumstances below:
- ☐ Fixed percentage (other than general rent -setting policy)  
If yes, state percentage/s and circumstances below:
- ☐ For household heads
- ☐ For other family members
- ☐ For transportation expenses
- ☐ For the non -reimbursed medical expenses of non -disabled or non -elderly families
- ☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- ☒ Yes for all developments
- ☐ Yes but only for some developments
- ☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- ☒ For all developments
- ☐ For all general occupancy developments (not elderly or disabled or elderly only)
- ☐ For specified general occupancy developments
- ☐ For certain parts of developments; e.g., the high    -rise portion
- ☐ For certain size units; e.g., larger bedrooms    zes
- ☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- ☐ Market comparability study
- ☐ Fair market rents (FMR)
- ☐ 95<sup>th</sup> percentile rents

- ☐ 75percentofoperatingcosts
- ☐ 100percentofoperatingcostsforgeneraloccupancy(family)developments
- ☒ Operatingcostsplusdebtservice
- ☐ The“rentalvalue”ofthe unit
- ☐ Other(listbelow)

f. Rentre -determinations:

1. Betweenincomereexaminations,howoftenmusttenantsreportchangesinincome orfamilycompositiontothePHAsuchthatthechangesresultinanadjustmentto rent?(selectallthatapply)

- ☐ Never
- ☐ Atfamilyoption
- ☒ Anytimethefamilyexperiencesanincomeincrease
- ☐ Anytimeafamilyexperiencesanincomeincreaseaboveathresholdamountor percentage:(ifs elected,specifythreshold) \$\_\_\_\_\_
- ☐ Other(listbelow)

g. ☐ Yes ☒ No: DoesthePHAplantoimplementindividualsavingsaccountsfor residents(ISAs)asanalternativetotherequired12month disallowanceofearnedincomeandphasinginofrentincreasesin thenextyear?

## **(2)FlatRents**

1. Insettingthemarket -basedflatrents,whatsourcesofinformationdidthePHAusetto establishcomparability?(selectallthatapply.)

- ☒ Thesection8rentreasonablenessstudyofcomparablehousing
- ☐ Surveyofrentslistedinlocalnewspaper
- ☐ Surveyofsimilarunassistedunitsintheneighborhood
- ☐ Other(list/describelow)

## **B. Section 8 Tenant -Based Assistance**

Exemptions: PHAs that do not administer Section 8 tenant -based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant -based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

## **(1)PaymentStandards**

a. What is the PHA's payment standard? (select the category that best describes your standard)

- ☐ At or above 90% but below 100% of FMR
- ☒ 100% of FMR
- ☐ Above 100% but at or below 110% of FMR
- ☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- ☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ The PHA has chosen to serve additional families by lowering the payment standard
- ☐ Reflects market or submarket
- ☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ Reflects market or submarket
- ☐ To increase housing options for families
- ☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- ☒ Annually
- ☐ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- ☒ Success rates of assisted families
- ☒ Rent burdens of assisted families
- ☐ Other (list below)

## **(2) Minimum Rent**

a. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0

- ☐ \$1-\$25  
☒ \$26-\$50

b. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

## **5. Operations and Management**

[24CFR Part 903. 79(e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- ☒ An organization chart showing the PHA's management structure and organization is attached. Attachment C
- ☐ A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	2609	552
Section 8 Vouchers	1587	301
Section 8 Certificates		
Section 8 Mod Rehab	N/A	
Special Purpose Section 8 Certificates/Vouchers (list individually)	N/A	
Public Housing Drug Elimination Program (PHDEP)	1543	326
Other Federal Programs (list individually)	N/A	

### **C. Management and Maintenance Policies**

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

Maintenance plan, personnel policy, procurement policy, asset disposition policy

(2) Section 8 Management: (list below)

Administrative plan

### **6. PHA Grievance Procedures**

[24 CFR Part 903.79(f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub -component 6A.

#### **A. Public Housing**

1. ☐ Yes ☒ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA offices should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- ☒ PHA main administrative office  
☐ PHA development management offices  
☐ Other (list below)

#### **B. Section 8 Tenant -Based Assistance**

1. ☐ Yes ☒ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant -based assistance program and informal hearing procedures for families assisted by the Section 8 tenant -based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:



2. Which PHA offices should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- ☒ PHA main administrative office  
☐ Other (list below)

## **7. Capital Improvement Needs**

[24CFR Part 903.79(g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

### **A. Capital Fund Activities**

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

#### **(1) Capital Fund Program Annual Statement**

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

- ☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (B)

-or-

- ☐ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert there)

#### **(2) Optional 5 -Year Action Plan**

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5-Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

- a. ☒ Yes ☐ No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

- ☒ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (D)

-or-

- ☐ The Capital Fund Program 5 - Year Action Plan is provided below: (if selected, copy the CFP Optional 5 Year Action Plan from the Table Library and insert there)

## **B. HOPE VI and Public Housing Development and Replacement Activities (Non -Capital Fund)**

Applicability of sub -component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- ☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)  
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- ☐ Revitalization Plan under development  
☐ Revitalization Plan submitted, pending approval  
☐ Revitalization Plan approved  
☐ Activities pursuant to an approved Revitalization Plan underway

- ☒ Yes ☐ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name/s below:

NY 3 -1, Mulford Gardens

- ☐ Yes ☒ No: d) Will the PHA be engaging in any mixed -financed development activities for public housing in the Plan year?

If yes, list developments or activities below:

- ☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?

If yes, list developments or activities below:

## **8. Demolition and Disposition**

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)

## 2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)

Demolition/Disposition Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:	

## **9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

Exemptions from Component 9: Section 8 only PHAs are not required to complete this section.

1. ☒ Yes ☐ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or

will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

## 2. Activity Description

☐ Yes ☒ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below.

Designation of Public Housing Activity Description	
1a. Development name: Loehr Ct., Walsh Homes, Curran Ct., Kristensen, Flynn, Martinelli & Troy	
1b. Development (project) number: NY3 -2B, 4, 6A, 6B, 7, 10A, & 10B	
2. Designation type:	
Occupancy by only the elderly	<input checked="" type="checkbox"/>
Occupancy by families with disabilities	<input type="checkbox"/>
Occupancy by only elderly families and families with disabilities	<input type="checkbox"/>
3. Application status (select one)	
Approved; included in the PHA's Designation Plan	<input checked="" type="checkbox"/>
Submitted, pending approval	<input type="checkbox"/>
Planned application	<input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (11/12/97)	
5. If approved, will this designation constitute a (select one)	
<input type="checkbox"/> New Designation Plan	
<input checked="" type="checkbox"/> Revision of a previously -approved Designation Plan?	
6. Number of units affected: 758	
7. Coverage of action (select one)	
<input type="checkbox"/> Part of the development	
<input checked="" type="checkbox"/> Total developments	

## 10. Conversion of Public Housing to Tenant -Based Assistance

[24 CFR Part 903.79(j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

### A. Assessment of Reasonable Revitalization Pursuant to section 202 of the HUD FY1996 HUD Appropriations Act

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the ePHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHA completing streamlined submissions may skip to component 11.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

Conversion of Public Housing Activity Description
1a. Development name: 1b. Development (project) number:
2. What is the status of the required assessment? <input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status) <input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD - approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one) <input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: ) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: ) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

**11.HomeownershipProgramsAdministeredbythePHA**

[24CFRPart903.79(k)]

**A.PublicHousing**

ExemptionsfromComponent11A:Section8      onlyPHAsarenotrequiredtocomplete11A.

1. ☒ Yes   ☐ No:      DoesthePHAadministeranyhomeownershipprograms administeredbythePHAunderanapprovedsection5(h) homeownershipprogram(42U.S.C.1437c(h)),oranapproved HOPE Iprogram(42U.S.C.1437aaa)orhasthePHAappliedor plantoapplytoadministeranyhomeownershipprogramsunder section5(h),theHOPEIprogram,orsection32oftheU.S. HousingActof1937(42U.S.C.1437z    -4).(If“No”,skipto component11B;if“yes”,completeoneactivitydescriptionfor eachapplicableprogram/plan,unlesseligibletocompletea streamlinedsubmissiondueto    **smallPHA** or **highperforming PHA**status.PHAscompletingstreamlinedsubmissionsmayskip tocomponent11B.)

2.ActivityDescription

- ☐ Yes   ☒ No:      HasthePHAprovidedallrequiredactivitydescriptioninformation forthiscomponentinthe    **optional**PublicHousingAsset ManagementTable?(If“yes”,skiptocomponent12.If“no” , completetheActivityDescriptiontablebelow.)

<b>PublicHousingHomeownershipActivityDescription (Completeoneforeachdevelopmentaffected)</b>	
1a.Developmentname:N/A	
1b.Development(project)number:N/A	
2.FederalProgramauthority:N/A <input type="checkbox"/> HOPEI <input type="checkbox"/> 5(h) <input type="checkbox"/> TurnkeyIII <input type="checkbox"/> Section32oftheUSHAof1937(effective10/1/99)	
3.Applicationstatus:(selectone) <input checked="" type="checkbox"/> Approved;includedinthePHA’sHomeownershipPlan/Program <input type="checkbox"/> Submitted,pendingapproval <input type="checkbox"/> Plannedapplication	
4.DateHomeownershipPlan/Program <b>approved</b> ,submitted,orplannedforsubmission: (DD/MM/YYYY)20/06/00	

5. Number of units affected: 25 to 30

6. Coverage of action: (select one)

☐ Part of the development

☒ Total development

## B. Section 8 Tenant Based Assistance

1. ☒ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

☐ Yes ☒ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- ☐ 25 or fewer participants  
☐ 26- 50 participants  
☐ 51 to 100 participants  
☐ more than 100 participants

b. PHA established eligibility criteria

☐ Yes ☒ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

## 12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.79(l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8 - Only PHAs are not required to complete sub-component C.

## A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

☐ Yes ☒ No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF Agency (select all that apply)

- ☐ Client referrals
- ☐ Information sharing regarding mutual clients (for rent determinations and otherwise)
- ☐ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- ☐ Jointly administer programs
- ☐ Partner to administer a HUD Welfare-to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

**B. Services and programs offered to residents and participants**

**(1) General**

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- ☐ Public housing rent determination policies
- ☒ Public housing admissions policies
- ☒ Section 8 admissions policies
- ☒ Preference in admission to section 8 for certain public housing families
- ☒ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

☐ Yes ☒ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)



Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office/ PHA main office/ other provider name)	Eligibility (public housing or section 8 participants or both)

## **(2) Family Self Sufficiency program/s**

### **a. Participation Description**

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2002 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

- b. ☐ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plan to take to achieve at least the minimum program size?  
If no, list steps the PHA will take below:

## **C. Welfare Benefit Reductions**

### **1. The PHA is complying with the statutory requirements of section 12(d) of the U.S.**

Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- ☐ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- ☐ Informing residents of new policy on admission and reexamination

- ☐ Actively notifying residents of new policy at times in addition to admission and reexamination.
- ☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- ☐ Establishing a protocol for exchange of information with all appropriate TANF agencies
- ☐ Other: (list below)

**D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937**

### **13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.79(m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

#### **A. Need for measures to ensure the safety of public housing residents**

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- ☒ High incidence of violent and/or drug -related crime in some or all of the PHA's developments
- ☒ High incidence of violent and/or drug -related crime in the area surrounding or adjacent to the PHA's developments
- ☐ Residents fearful for their safety and/or the safety of their children
- ☒ Observed lower -level crime, vandalism and/or graffiti
- ☒ People on waiting list unwilling to move into one or more developments due to perceived and/or actual level of violent and/or drug -related crime
- ☐ Other (describe below)

2. What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☒ Safety and security survey of residents
- ☒ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☒ Resident reports
- ☒ PHA employee reports
- ☒ Police reports
- ☐ Demonstrable, quantifiable success with previous or ongoing anti-crime/anti-drug programs
- ☐ Other (describe below)

3. Which developments are most affected? (list below)

NY3 -1, Mulford Gardens; NY3 -3, Schlobohm; NY3 -5, Calcagno Homes & NY3 -9 Cottage Place

**B. Crime and Drug Prevention activities the PHA has undertaken or plan to undertake in the next PHA fiscal year**

1. List the crime prevention activities the PHA has undertaken or plan to undertake: (select all that apply)

- ☒ Contracting with outside and/or resident organizations for the provision of crime and/or drug -prevention activities -
- ☐ Crime Prevention Through Environmental Design
- ☒ Activities targeted to at -risk youth, adults, or seniors
- ☒ Volunteer Resident Patrol/Block Watchers Program
- ☒ Other (describe below)  
Drug treatment clinics

2. Which developments are most affected? (list below)

NY3 -1, NY3 -3, NY3 -5 & NY3 -9

**C. Coordination between PHA and the police**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☒ Police involvement in development, implementation, and/or ongoing evaluation of drug -elimination plan
- ☒ Police provide crime data to housing authority staff for analysis and action
- ☒ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- ☒ Police regularly testify in and otherwise support eviction cases
- ☒ Police regularly meet with the PHA management and residents
- ☒ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- ☐ Other activities (list below)

1. Which developments are most affected? (list below)

NY3 -1, NY3 -3, NY3 -5 & NY3 -9

**D. Additional information as required by PHDEP/PHDEP Plan**

PHA eligible for FY2001 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

- ☐ Yes ☒ No: Has the PHA included the PHDEP Plan for FY2002 in this PHA Plan?
- ☐ Yes ☒ No: This PHDEP Plan is an Attachment. (Attachment:)

## **14. RESERVED FOR PET POLICY**

[24CFR Part 903.79(n)]

## **15. Civil Rights Certifications**

[24CFR Part 903.79(o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

## **16. Fiscal Audit**

[24CFR Part 903.79(p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☒ Yes ☐ No: Were there any findings as the result of that audit?
4. ☐ Yes ☒ No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? \_\_\_\_
5. ☐ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

## **17. PHA Asset Management**

[24CFR Part 903.79(q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☒ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan? -
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - ☐ Not applicable
  - ☐ Private management
  - ☒ Development-based accounting
  - ☒ Comprehensive stock assessment

☐ Other:(list below)

3. ☐ Yes ☒ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24CFR Part 903.79(r)]

### **A. Resident Advisory Board Recommendations**

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

☐ Attached as Attachment (Filename)

☒ Provided below:

Board was in general agreement with policies and Agency Plan documents.

3. In what manner did the PHA address those comments? (select all that apply)

☒ Considered comments, but determined that no changes to the PHA Plan were necessary.

☐ The PHA changed portions of the PHA Plan in response to comments  
List changes below:

☐ Other: (list below)

### **B. Description of Election process for Residents on the PHA Board**

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. ☒ Yes ☐ No: Was there a resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

### **3. Description of Resident Election Process**

a. Nomination of candidates for place on the ballot: (select all that apply)

☐ Candidates were nominated by resident and assisted family organizations

☐ Candidates could be nominated by any adult recipient of PHA assistance

☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot

☒ Other: (describe) Petitions signed by 50 residents

b. Eligible candidates: (select one)

- ☐ Any recipient of PHA assistance
- ☐ Any head of household receiving PHA assistance
- ☒ Any adult recipient of PHA assistance
- ☐ Any adult member of a resident or assisted family organization
- ☐ Other (list)

c. Eligible voters: (select all that apply)

- ☒ All adult recipients of PHA assistance (public housing and section 8 tenant assistance) -based
- ☐ Representatives of all PHA resident and assisted family organizations
- ☐ Other (list)

### C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: City of Yonkers

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s .
- ☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- ☐ Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

The City of Yonkers plan has established the following housing priorities to address housing needs, which are also the priorities of the Yonkers Municipal Housing Authority:

- A. Maintain the supply of decent, safe and sanitary rental housing that is affordable for low, very low and moderate income families
- B. The modernization of Yonkers Municipal Housing Authority housing for occupancy by low and very low income families

### D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

## **Attachments**

Use this section to provide any additional attachments referenced in the Plans.

## Attachment A:

Adopted June 15, 1999

Effective: July 1, 1999

### Deconcentration Policy

It is the policy of the Yonkers Municipal Housing Authority of (YMHA) to house families in a manner that will prevent a concentration of poverty families and/or concentration of higher income families in any one development. The specific objective of the YMHA is to house no less than 40% of its inventory with families that have income at or below 30% of the area median income by public housing development. Also the YMHA will take action to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the YMHA does not concentrate families with higher income levels, it is the goal of the YMHA not to house more than 60% of its units in any one development with families whose income exceeds 30% of the area median income. The YMHA will track the status of family income, by development, on a monthly basis by utilizing income reports generated by the YMHA. To accomplish the deconcentration goal the YMHA will take the following actions:

- A. At the beginning of each fiscal year, the YMHA will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of move-ins from the previous fiscal year.
- B. To accomplish the goal of:
  - 1. Housing not less than 40% of its inventory on an annual basis with families that have incomes at or below 30% of area median income, and
  - 2. No housing families with incomes that exceed 30% of the area median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, the YMHA's Tenant Selection and Assignment Plan, which is a part of this policy, provides for the utilization of local preferences with regards to applicant selection from its waiting list.



## AttachmentB:

**CAPITALFUNDPROGRAMTABLESSTARTHERE**

AnnualStatement/PerformanceandEvaluationReport					
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary					
PHAName:YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-02 ReplacementHousingFactorGrantNo:			FederalFYofGrant: 2002
<input checked="" type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input type="checkbox"/> RevisedAnnualStatement(revisionno:    ) <input type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding: <input type="checkbox"/> FinalPerformanceandEvaluationReport					
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	1,228,129			
3	1408ManagementImprovementsSoftCosts	3,700,000			
	ManagementImprovementsHardCosts				
4	1410Administration	500,000			
5	1411Audit				
6	1415LiquidatedDamages				
7	1430FeesandCosts	100,000			
8	1440SiteAcquisition				
9	1450SiteImprovement				
10	1460DwellingStructures	300,000			
11	1465.1DwellingEquipment —Nonexpendable	250,000			
12	1470NondwellingStructures	500,000			
13	1475NondwellingEquipment				
14	1485Demolition				
15	1490Replacem entReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1499DevelopmentActivities				
19	1502Contingency				
	AmountofAnnualGrant:(sumoflines.....)	6,578,129			
	AmountofflineXXXRelatedtoLBPActivities				
	AmountofflineXXXRelatedtoSection504compliance				

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHAName: Yonkers Municipal Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P003501-02 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
	Amount of line XX Related to Security --Soft Costs	3,600,000			
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-02 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2002			
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
NY3 -10A MartinelliManor	A.Replaceflatbuilt -uproof		1460	1bldg	150,000				
	<b>Subtotal</b>				<b>150,000</b>				
NY3 -10B TroyManor	A.Replaceflatbuilt -uproof		1460	1bldg	150,000				
	<b>Subtotal</b>				<b>150,000</b>				
HAWide	A.Replaceappliances		1465.1	320pair	250,000				
	<b>Subtotal</b>				<b>250,000</b>				
HA-Wide Structures	A.RenovationofcentralAdministrative offices		1470	LS	500,000				
	<b>Subtotal</b>				<b>500,000</b>				
HA-Wide Operations	A.HousingOperation		1406	19%	1,228,129				
	<b>Subtotal</b>				<b>1,228,129</b>				
HAWide	A.Providecomputertraining		1408	50%	30,000				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>									
PHAName: YonkersMunicipalHousingAuthority			GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-02 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2002		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
Management Improvements									
	B.Provideresidentbusiness opportunities		1408	5	40,000				
	C.ContinueSecurity		1408	100%	3,600,000				
	D.Maintenancetraining		1408	5	15,000				
	E.Administrativetraining		1408	10	15,000				
	<b>Subtotal</b>				<b>3,700,000</b>				
HAWide Administrative Cost	A.FundsfortheIntake OrientationEmployee: Salary -\$38,000 Benefits -\$12,000		1410	1	50,000				
	B.Fundsfor: MODCoordinator -\$52,000 Inspector -\$35,000 Clerk -\$25,000 Benefits -\$33,600		1410	3	145,600				
	C.Fundsfor: ExistingHASTaffinvolvedinCGP Activities		1410	4	304,400				
	<b>Subtotal</b>				<b>500,000</b>				
HA-Wide Fees&Cost	A.A/Edesign		1430	100%	100,000				
	<b>Subtotal</b>				<b>100,000</b>				
	<b>GrandTotal</b>				<b>6,578,129</b>				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: <b>Yonkers Municipal Housing Authority</b>			Grant Type and Number Capital Fund Program No: <b>NY36P003501-02</b> Replacement Housing Factor No:			Federal FY of Grant: <b>2002</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NY3 -10A Martenelli Manor	3/31/04			9/30/05			
NY3 -10B Troy Manor	3/31/04			9/30/05			
HA-Wide	3/31/04			9/30/05			

**AttachmentD:**  
**CapitalFundProgramFive -YearActionPlan**  
**PartI:Summary**

PHAName YonkersMunicipal HousingAuthority		Yonkers/Westchester/NewYork		<input type="checkbox"/> Original5 -YearPlan <input checked="" type="checkbox"/> RevisionNo:2	
Development Number/Name/HA-Wide	Year1	WorkStatementforYear2 FFYGrant: PHAFY:2003	WorkStatementforYear3 FFYGrant: PHAFY:2004	WorkStatementforYear4 FFYGrant: PHAFY:2005	WorkStatementforYear5 FFYGrant: PHAFY:2006
NY3 -1 MulfordGardens	Annual Statement	420,200	420,200	420,200	420,200
NY3 -2AHallHouse		38,900	38,900	38,900	38,900
NY3 -2BLoehrCt.		77,800	77,800	77,800	77,800
NY3 -3Scholbohm		311,250	311,250	311,250	311,250
NY3 -4WalshHomes		214,000	214,000	214,000	214,000
NY3 -5 CalcagnoHomes		212,000	212,000	212,000	212,000
NY3 -6A CurranCourt		136,200	136,200	136,200	136,200
NY3 -6BKristensen		19,450	19,450	19,450	19,450
NY3 -7FlynnManor		97,260	97,260	97,260	97,260
NY3 -9CottagePlace		194,550	194,550	194,550	194,550
NY3 -10A MartinelloManor		38,900	38,900	38,900	38,900
NY3 -10BC.J.Troy		38,900	38,900	38,900	38,900
NY3 -11A Dr.F.X.O'Rourke		38,900	38,900	38,900	38,900
NY3 -11B RaleighValentine		9,739	9,739	9,739	9,739
NY3 -11C JudgeA.J.Doran		19,450	19,450	19,450	19,450
NY3 -11D AndrewSmith		19,450	19,450	19,450	19,450
NY3 -11E JudgeA.Fiorillo		9,738	9,738	9,738	9,738
NY3 -13ALawrence Christopher		9,739	9,739	9,739	9,739
NY13B FrancisReagan		38,900	38,900	38,900	38,900

HAWide Nondwelling Structures& Equipment		186,660	186,660	186,660	186,660
HA-WideMangmt Improvements		3,700,000	3,700,000	3,700,000	3,700,000
HA-Wide Administration		500,000	500,000	500,000	500,000
HA-Wideother		100,000	100,000	100,000	100,000
HA-WideOperations		146,143	146,143	146,143	146,143
TotalCFPFunds (Est.)		6,578,129	6,578,129	6,578,129	6,578,129
TotalReplacement HousingFactorFunds					

**CapitalFundProgramFive -YearAction Plan**  
**PartII:SupportingPages —WorkActivities**

Activitiesfor Year1	ActivitiesforYear:2 FFYGrant: PHAFY:2003			ActivitiesforYear:3 FFYGrant: PHAFY:2004		
	NY3 -1 MulfordGardens			NY3 -1 MulfordGardens		
	A.Siteimprovements	35%	84,040	A.Siteimprovements	35%	84,040
	B.Enveloperenovations	17Bldgs	168,080	B.Enveloperenovations	17Bldgs	168,080
	C.Interiorrenovations	550	168,080	C.Interiorrenovations	550	168,080
	<b>Subtotal</b>		<b>420,200</b>	<b>Subtotal</b>		<b>420,200</b>
	NY3 -2AHallHouse			NY3 -2AHallHouse		
	A.Siteimprovements	40%	7,780	A.Siteimprovements	40%	7,780
	B.Enveloperenovations	4Bldgs	15,560	B.Enveloperenovations	4Bldgs	15,560
	C.Interiorrenovations	48	15,560	C.Interiorrenovations	48	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	NY3 -2BLoehrCt.			NY3 -2B LoehrCt.		
	A.Siteimprovements	40%	15,560	A.Siteimprovements	40%	15,560
	B.Enveloperenovations	2Bldgs	31,120	B.Enveloperenovations	2Bldgs	31,120
	C.Interiorrenovations	108	31,120	C.Interiorrenovations	108	31,120
	<b>Subtotal</b>		<b>77,800</b>	<b>Subtotal</b>		<b>77,800</b>
	NY3 -3Schlobohm			NY3 -3Schlobohm		
	A.Siteimprovements	40%	62,250	A.Siteimprovements	40%	62,250
	B.Enveloperenovations	8Bldgs	124,500	B.Enveloperenovations	8Bldgs	124,500
	C.Interiorrenovations	411	124,500	C.Interiorrenovations	411	124,500
	<b>Subtotal</b>		<b>311,250</b>	<b>Subtotal</b>		<b>311,250</b>
	NY3 -4WalshHomes			NY3 -4WalshHomes		
	A.Siteimprovements	40%	42,800	A.Siteimprovements	40%	42,800
	B.Enveloperenovations	3Bldgs	85,600	B.Enveloperenovations	3Bldgs	85,600
	C.Interiorrenovations	300	85,600	C.Interiorrenovations	300	85,600
	<b>Subtotal</b>		<b>214,000</b>	<b>Subtotal</b>		<b>214,000</b>



	NY3 -5CalganoHomes			NY3 -5CalganoHomes		
	A.Siteimprovements	35%	42,400	A.Siteimprovements	35%	42,400
	B.Enveloperenovations	3Bldgs	84,800	B.Enveloperenovations	3Bldgs	84,800
	C.Interiorrenovations	278	84,800	C.Interiorrenovations	278	84,800
	<b>Subtotal</b>		<b>212,000</b>	<b>Subtotal</b>		<b>212,000</b>
	NY3 -6ACurranCt.			NY3 -6ACurranCt.		
	A.Siteimprovements	35%	27,240	A.Siteimprovements	35%	27,240
	B.Enveloperenovations	4Bldgs	54,480	B.Enveloperenovations	4Bldgs	54,480
	C.Interiorrenovations	186	54,480	C.Interiorrenovations	186	54,480
	<b>Subtotal</b>		<b>136,200</b>	<b>Subtotal</b>		<b>136,200</b>
	NY3 -6BKirstensen			NY3 -6BKirstensen		
	A.Siteimprovements	40%	3,890	A.Siteimprovements	40%	3,890
	B.Enveloperenovations	1Bldgs	7,780	B.Enveloperenovations	1Bldgs	7,780
	C.Interiorrenovations	32	7,780	C.Interiorrenovations	32	7,780
	<b>Subtotal</b>		<b>19,450</b>	<b>Subtotal</b>		<b>19,450</b>
	NY3 -7FlynnManor			NY3 -7FlynnManor		
	A.Siteimprovements	20%	19,452	A.Siteimprovements	20%	19,452
	B.Enveloperenovations	1Bldgs	38,904	B.Enveloperenovations	1Bldgs	38,904
	C.Interiorrenovations	1400	38,904	C.Interiorrenovations	1400	38,904
	<b>Subtotal</b>		<b>97,260</b>	<b>Subtotal</b>		<b>97,260</b>
	NY3 -9CottagePlace			NY3 -9CottagePlace		
	A.Siteimprovements	10%	38,910	A.Siteimprovements	10%	38,910
	B.Enveloperenovations	14Bldgs	77,820	B.Enveloperenovations	14Bldgs	77,820
	C.Interiorrenovations	256	77,820	C.Interiorrenovations	256	77,820
	<b>Subtotal</b>		<b>194,550</b>	<b>Subtotal</b>		<b>194,550</b>
	NY3 -10A MartinelloManor			NY3 -10A MartinelloManor		
	A.Siteimprovements	15%	7,780	A.Siteimprovements	15%	7,780
	B.Enveloperenovations	1Bldg.	15,560	B.Enveloperenovations	1Bldg.	15,560
	C.Interiorrenovations	45	15,560	C.Interiorrenovations	45	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	NY3 -10B			NY3 -10B		

	CajetanJ.Troy			CajetanJ.Troy		
	A.Siteimprovements	15%	7,780	A.Siteimprovements	15%	7,780
	B.Enveloperenovations	1Bldg.	15,560	B.Enveloperenovations	1Bldg.	15,560
	C.Interiorrenovations	55	15,560	C.Interiorrenovations	55	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	NY3 -11A Dr.F.X.O'Rourke			NY3 -11A Dr.F.X.O'Rourke		
	A.Siteimprovements	20%	7,780	A.Siteimprovements	10%	7,780
	B.Enveloperenovations	14Bldgs	15,560	B.Enveloperenovations	48	15,560
	C.Interiorrenovations	48	15,560	C.Interiorrenovations	96	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	NY3 -11B RaleighValentine			NY3 -11B RaleighValentine		
	A.Siteimprovements	20%	1,948	A.Siteimprovements	20%	1,948
	B.Enveloperenovations	5Bldgs.	3,896	B.Enveloperenovations	5Bldgs.	3,896
	C.Interiorrenovations	14	3,895	C.Interiorrenovations	14	3,895
	<b>Subtotal</b>		<b>9,739</b>	<b>Subtotal</b>		<b>9,739</b>
	NY3 -11C JudgeA.J.Doran			NY3 -11C JudgeA.J.Doran		
	A.Siteimprovements	10%	3,890	A.Siteimprovements	10%	3,890
	B.Enveloperenovations	28	7,780	B.Enveloperenovations	28	7,780
	C.Interiorrenovations	56	7,780	C.Interiorrenovations	56	7,780
	<b>Subtotal</b>		<b>19,450</b>	<b>Subtotal</b>		<b>19,450</b>
	NY3 -11D AndrewSmith			NY3 -11D AndrewSmith		
	A.Siteimprovements	15%	3,890	A.Siteimprovements	10%	3,890
	B.Enveloperenovations	5Bldgs	7,780	B.Enveloperenovations	28	7,780
	C.Interiorrenovations	28	7,780	C.Interiorrenovations	56	7,780
	<b>Subtotal</b>		<b>19,450</b>	<b>Subtotal</b>		<b>19,450</b>
	NY3 -11E JudgeA.Fiorillo			NY3 -11E JudgeA.Fiorillo		

	A.Siteimprovements	15%	1,948	A.Siteimprovements	15%	1,948
	B.Enveloperenovations	4Bldgs.	3,895	B.Enveloperenovations	4Bldgs.	3,895
	C.Interiorrenovations	24	3,895	C.Interiorrenovations	24	3,895
	<b>Subtotal</b>		<b>9,738</b>	<b>Subtotal</b>		<b>9,738</b>
	NY3 -13A LawrenceChristopher			NY3 -13A LawrenceChristopher		
	A.Siteimprovements	20%	1,948	A.Siteimprovements	20%	1,948
	B.Enveloperenovations	3Bldgs.	3,896	B.Enveloperenovations	3Bldgs.	3,896
	C.Interiorrenovations	14	3,895	C.Interiorrenovations	14	3,895
	<b>Subtotal</b>		<b>9,739</b>	<b>Subtotal</b>		<b>9,739</b>
	NY3 -13B FrancisReagen			NY3 -13B FrancisReagen		
	A.Siteimprovements	20%	7,780	A.Siteimprovements	20%	7,780
	B.Enveloperenovations	7Bldgs.	15,560	B.Enveloperenovations	7Bldgs.	15,560
	C.Interiorrenovations	44	15,560	C.Interiorrenovations	44	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	HAWideNondwelling Structures&Equipt			HAWide NondwellingStructures &Equipt		
	A.Maintenancetools& equipment		68,330	A.Maintenancetools& equipment		68,330
	B.Officeequipment		68,330	B.Enveloperenovations		68,330
	C.Maintenancevehicles		50,000	C.Interiorrenovations		50,000
	<b>Subtotal</b>		<b>186,660</b>	<b>Subtotal</b>		<b>186,660</b>
	HAWide -Operations		146,143	HAWide -Operations		146,143
	<b>Subtotal</b>		<b>146,143</b>	<b>Subtotal</b>		<b>146,143</b>
	HAWide – Administration		500,000	HAWide – Administration		500,000
	<b>Subtotal</b>		<b>500,000</b>	<b>Subtotal</b>		<b>500,000</b>
	HAWide –Other		100,000	HAWide –Other		100,000
	<b>Subtotal</b>		<b>100,000</b>	<b>Subtotal</b>		<b>100,000</b>
	HAWideManagement Improvements			HAWideManagement Improvements		

	A.ComputerTraining	15	30,000	A.ComputerTraini ng	15	30,000
	B.Security	100%	3,600,000	B.Security	100%	3,600,000
	C.ResidentBusiness opportunity	5	10,000	C.ResidentBusiness opportunity	5	10,000
	D.ResidentJobtraining	6	15,000	D.ResidentJobtraining	6	15,000
	E.ResidentParticipation	50%	10,000	E.ResidentParticipation	50%	10,000
	F.Administrative Training	4	12,000	F.Administrative Training	4	12,000
	G.Maintenance Training	4	12,000	G.Maintenance Training	4	12,000
	H.CapitalGrant Training	4	11,000	H.CapitalGrant Training	4	11,000
	<b>Subtotal</b>		<b>3,700,000</b>	<b>Subtotal</b>		<b>3,700,000</b>
	<b>GrandTotal</b>		<b>6,578,129</b>	<b>GrandTotal</b>		<b>6,578,129</b>

**CapitalFundProgramFive -YearActionPlan**  
**PartII:SupportingPages —WorkActivities**

Activitiesfor Year1	ActivitiesforYear:4 FFYGrant: PHAFY:2005			ActivitiesforYear:5 FFYGrant: PHAFY:2006		
	NY3 -1 MulfordGardens			NY3 -1 MulfordGardens		
	A.Siteimprovements	35%	84,040	A.Siteimprovements	35%	84,040
	B.Enveloperenovations	17Bldgs	168,080	B.Enveloperenovations	17Bldgs	168,080
	C.Interiorrenovations	550	168,080	C.Interiorrenovations	550	168,080
	<b>Subtotal</b>		<b>420,200</b>	<b>Subtotal</b>		<b>420,200</b>
	NY3 -2AHallHouse			NY3 -2AHallHouse		
	A.Siteimprovements	40%	7,780	A.Siteimprovements	40%	7,780
	B.Enveloperenovations	4Bldgs	15,560	B.Enveloperenovations	4Bldgs	15,560
	C.Interiorrenovations	48	15,560	C.Interiorrenovations	48	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	NY3 -2B LoehrCt.			NY3 -2B LoehrCt.		
	A.Siteimprovements	40%	15,560	A.Siteimprovements	40%	15,560
	B.Enveloperenovations	2Bldgs	31,120	B.Enveloperenovations	2Bldgs	31,120
	C.Interiorrenovations	108	31,120	C.Interiorrenovations	108	31,120
	<b>Subtotal</b>		<b>77,800</b>	<b>Subtotal</b>		<b>77,800</b>
	NY3 -3Schlobohm			NY3 -3Schlobohm		
	A.Siteimprovements	40%	62,250	A.Siteimprovements	40%	62,250
	B.Enveloperenovations	8Bldgs	124,500	B.Envelopere novations	8Bldgs	124,500
	C.Interiorrenovations	411	124,500	C.Interiorrenovations	411	124,500
	<b>Subtotal</b>		<b>311,250</b>	<b>Subtotal</b>		<b>311,250</b>
	NY3 -4WalshHomes			NY3 -4WalshHomes		
	A.Siteimprovements	40%	42,800	A.Siteimprovements	40%	42,800
	B.Enveloperenovations	3Bldgs	85,600	B.Enveloperenovations	3Bldgs	85,600
	C.Interiorrenovations	300	85,600	C.Interiorrenovations	300	85,600
	<b>Subtotal</b>		<b>214,000</b>	<b>Subtotal</b>		<b>214,000</b>

	NY3 -5CalganoHomes			NY3 -5CalganoHomes		
	A.Siteimprovements	35%	42,400	A.Siteimprovements	35%	42,400
	B.Enveloperenovations	3Bldgs	84,800	B.Enveloperenovations	3Bldgs	84,800
	C.Interiorrenovations	278	84,800	C.Interiorrenovations	278	84,800
	<b>Subtotal</b>		<b>212,000</b>	<b>Subtotal</b>		<b>212,000</b>
	NY3 -6ACurranCt.			NY3 -6ACurranCt.		
	A.Siteimprovements	35%	27,240	A.Siteimprovements	35%	27,240
	B.Enveloperenovations	4Bldgs	54,480	B. Enveloperenovations	4Bldgs	54,480
	C.Interiorrenovations	186	54,480	C.Interiorrenovations	186	54,480
	<b>Subtotal</b>		<b>136,200</b>	<b>Subtotal</b>		<b>136,200</b>
	NY3 -6BKirstensen			NY3 -6BKirstensen		
	A.Siteimprovements	40%	3,890	A.Siteimprovements	40%	3,890
	B.Enveloperenovations	1Bldgs	7,780	B.Enveloperenovations	1Bldgs	7,780
	C.Interiorrenovations	32	7,780	C.Interiorrenovations	32	7,780
	<b>Subtotal</b>		<b>19,450</b>	<b>Subtotal</b>		<b>19,450</b>
	NY3 -7FlynnManor			NY3 -7FlynnManor		
	A.Siteimprovements	20%	19,452	A.Siteimprovements	20%	19,452
	B.Enveloperenovations	1Bldgs	38,904	B.Enveloperenovations	1Bldgs	38,904
	C.Interiorrenovations	1400	38,904	C.Interiorrenovations	1400	38,904
	<b>Subtotal</b>		<b>97,260</b>	<b>Subtotal</b>		<b>97,260</b>
	NY3 -9CottagePlace			NY3 -9CottagePlace		
	A.Siteimprovements	10%	38,910	A.Siteimprovements	10%	38,910
	B.Enveloperenovations	14Bldgs	77,820	B.Envelope renovations	14Bldgs	77,820
	C.Interiorrenovations	256	77,820	C.Interiorrenovations	256	77,820
	<b>Subtotal</b>		<b>194,550</b>	<b>Subtotal</b>		<b>194,550</b>
	NY3 -10A MartinelloManor			NY3 -10A MartinelloManor		
	A.Siteimprovements	15%	7,780	A.Siteimprovements	15%	7,780
	B.Enveloperenovations	1Bldg.	15,560	B.Enveloperenovations	1Bldg.	15,560
	C.Interiorrenovations	45	15,560	C.Interiorrenovations	45	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	NY3 -10B			NY3 -10B		

	CajetanJ.Troy			CajetanJ.Troy		
	A.Siteimprovements	15%	7,780	A.Siteimprovements	15%	7,780
	B.Enveloperenovations	1Bldg.	15,560	B.Enveloperenovations	1Bldg.	15,560
	C.Interiorrenovations	55	15,560	C.Interiorrenovations	55	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	NY3 -11A Dr.F.X.O'Rourke			NY3 -11A Dr.F.X.O'Rourke		
	A.Siteimprovements	20%	7,780	A.Siteimprovements	20%	7,780
	B.Enveloperenovations	14Bldgs.	15,560	B.Enveloperenovations	14Bldgs.	15,560
	C.Interiorrenovations	48	15,560	C.Interiorrenovations	48	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	NY3 -11B RaleighValentine			NY3 -11B RaleighValentine		
	A.Siteimprovements	20%	1,948	A.Siteimprovements	20%	1,948
	B.Enveloperenovations	5Bldgs.	3,896	B.Enveloperenovations	5Bldgs.	3,896
	C.Interiorrenovations	14	3,895	C.Interiorrenovations	14	3,895
	<b>Subtotal</b>		<b>9,739</b>	<b>Subtotal</b>		<b>9,739</b>
	NY3 -11C JudgeA.J.Doran			NY3 -11C JudgeA.J.Doran		
	A.Siteimprovements	10%	3,890	A.Siteimprovements	10%	3,890
	B.Enveloperenovations	28	7,780	B.Enveloperenovations	28	7,780
	C.Interiorrenovations	56	7,780	C.Interiorrenovations	56	7,780
	<b>Subtotal</b>		<b>19,450</b>	<b>Subtotal</b>		<b>19,450</b>
	NY3 -11D AndrewSmith			NY3 -11D AndrewSmith		
	A.Siteimprovements	15%	3,890	A.Siteimprovements	15%	3,890
	B.Enveloperenovations	5Bldgs.	7,780	B.Enveloperenovations	5Bldgs.	7,780
	C.Interiorrenovations	28	7,780	C.Interiorrenovations	28	7,780
	<b>Subtotal</b>		<b>19,450</b>	<b>Subtotal</b>		<b>19,450</b>
	NY3 -11E JudgeA.Fiorillo			NY3 -11E JudgeA.Fiorillo		

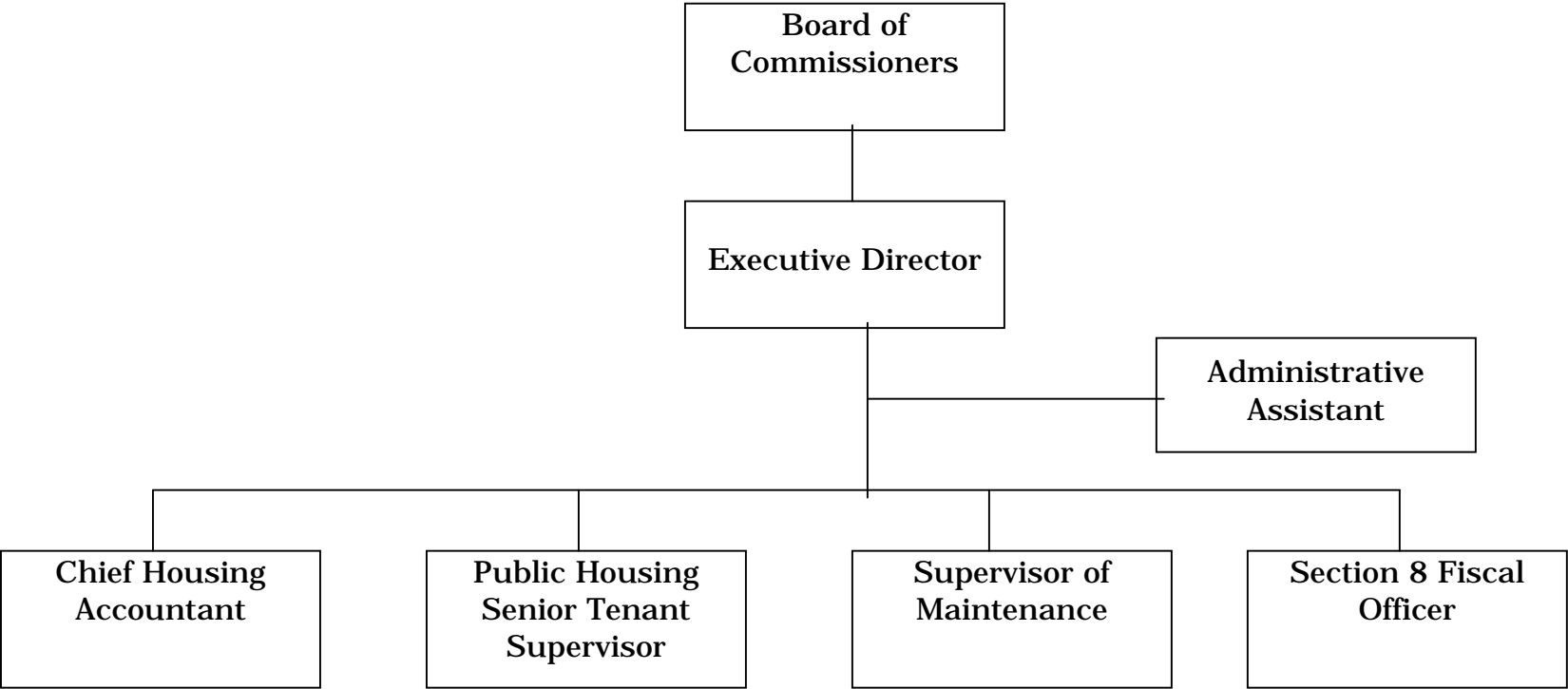
	A.Siteimprovements	15%	1,948	A.Siteimprovements	15%	1,948
	B.Enveloperenovations	4Bldgs.	3,895	B.Enveloperenovations	4Bldgs.	3,895
	C.Interiorrenovations	24	3,895	C.Interiorrenovations	24	3,895
	<b>Subtotal</b>		<b>9,738</b>	<b>Subtotal</b>		<b>9,738</b>
	NY3 -13A LawrenceChristopher			NY3 -13A LawrenceChristopher		
	A.Siteimprovements	20%	1,948	A.Siteimprovements	20%	1,948
	B.Enveloperenovations	3Bldgs.	3,896	B.Enveloperenovations	3Bldgs.	3,896
	C.Interiorrenovations	14	3,895	C.Interiorrenovations	14	3,895
	<b>Subtotal</b>		<b>9,739</b>	<b>Subtotal</b>		<b>9,739</b>
	NY3 -13B FrancisReagen			NY3 -13B FrancisReagen		
	A.Siteimprovements	20%	7,780	A.Siteimprovements	20%	7,780
	B.Enveloperenovations	7Bldgs.	15,560	B.Enveloperenovations	7Bldgs.	15,560
	C.Interiorrenovations	44	15,560	C.Interiorrenovations	44	15,560
	<b>Subtotal</b>		<b>38,900</b>	<b>Subtotal</b>		<b>38,900</b>
	HAWide NondwellingStructures &Equipt			HAWide NondwellingStructures &Equipt		
	A.Maintenancetools& equipment		68,330	A.Maintenancetools& equipment		68,330
	B.Enveloperenovations		68,330	B.Envelope renovations		68,330
	C.Interiorrenovations		50,000	C.Interiorrenovations		50,000
	<b>Subtotal</b>		<b>186,660</b>	<b>Subtotal</b>		<b>186,660</b>
	HAWide -Operations		146,143	HAWide -Operations		146,143
	<b>Subtotal</b>		<b>146,143</b>	<b>Subtotal</b>		<b>146,143</b>
	HAWide – Administration		500,000	HAWide – Administration		500,000
	<b>Subtotal</b>		<b>500,000</b>	<b>Subtotal</b>		<b>500,000</b>
	HAWide –Other		100,000	HAWide –Other		100,000
	<b>Subtotal</b>		<b>100,000</b>	<b>Subtotal</b>		<b>100,000</b>
	HAWideManagement Improvements			HAWideManagement Improvements		



	A.ComputerTraining	15	30,000	A.ComputerTraining	15	30,000
	B.Security	100%	3,600,000	B.Security	100%	3,600,000
	C.ResidentBusiness opportunity	5	10,000	C.ResidentBusiness opportunity	5	10,000
	D.ResidentJobtraining	6	15,000	D.ResidentJobtraining	6	15,000
	E.ResidentParticipation	50%	10,000	E.ResidentParticipation	50%	10,000
	F.Administrat ive Training	4	12,000	F.Administrative Training	4	12,000
	G.Maintenance Training	4	12,000	G.Maintenance Training	4	12,000
	H.CapitalGrant Training	4	11,000	H.CapitalGrant Training	4	11,000
	<b>Subtotal</b>		<b>3,700,000</b>	<b>Subtotal</b>		<b>3,700,000</b>
	<b>GrandTotal</b>		<b>6,578,129</b>	<b>GrandTotal</b>		<b>6,578,129</b>

Attachment C:

**Yonkers Municipal Housing Authority**  
**Organization Chart**



## Required Attachment E

### C. Criteria for Substantial Deviation and Significant Amendments

#### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### A. Substantial Deviation from the 5-year Plan:

The Yonkers Municipal Housing Authority's (YMHA) Definition of Substantial Deviation and Significant Amendment or Modification are as follows:

- change to rent or admissions policies or organization of the waiting list;
- addition of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and
- any change with regard to demolition or disposition, designation, home ownership programs or conversion activities.

#### B. Significant Amendment or Modification to the Annual Plan:

The Yonkers Municipal Housing Authority's (YMHA) Definition of Substantial Deviation and Significant Amendment or Modification are as follows:

- change to rent or admissions policies or organization of the waiting list;
- addition of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and
- any change with regard to demolition or disposition, designation, home ownership programs or conversion activities.

## **Required Attachment F**

### **Summary of Policy and Program Changes**

The YMHA has not made nor intends to make any major policy or program changes in 2002. Local preferences were established and will not change, rent policies remain the same, community service policy parameters were included in our lease but will not be utilized as part of the recertification process for FY02 per HUD notification. There will be no changes to the ACOP, only minor amendments to the Administration Plan, which the conversion of certifications to Housing vouchers add. The family development pet policy is continuing to be utilized by resident families.

## Required Attachment G:

### Resident Member on the PHA Governing Board

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

Ms. Roberta Allen and Ms. Agnes Scott

B. How was the resident board member selected: (select one)?

- ☒ Elected  
☐ Appointed

C. The term of appointment is (include the date term expires):

8/31/96 to 9/30/03 and 8/31/97 to 9/30/02

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full-time basis  
☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.  
☐ Other (explain):

B. Date of next term expiration of a governing board member:

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

## **Required Attachment H:**

### **Membership of the Resident Advisory Board or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Jacquelin Anderson	Amelia Pupchyk
Gloria Baultrip	Ines Reyes
Beverly Blagmon	Phyllis Rinadi
Maruerite Bruton	Guillermo Sanchez
Raymond DeFino	Louis Simmons
Alvin Des Verney	Barbara Sommour
Mary Evans	Nathaniel Weathers
Joseph Finnelle	Jacquelin Weaver
Carl Frederick	Mary Wilson
Gloria Gallardo	Andrea Villalona
Claudette Grady	Margaret Jessup
Ruth Guthrie	Janice French -Hardy
Mary Kochetta	Sabina Fishburne
Elizabeth Owens	Sarah Royster
Adrean Owens -Saunders	Roberta Allen
Michael Platt	Agnes Scoll

YMHA is in the process of developing a solicitation letter for Section 8 clients and landlords to be issued before the 15<sup>th</sup> of July requesting volunteers to participate on a Resident Advisory Board that will be stand alone and will have one representative that will participate in monthly Board Commission meetings.

Our goal will be to have the Section 8 RAB in place by October, 2002.

## **AttachmentI:**

### **Progressinmeetingthe5 -YearPlanMissionandGoals**

The PHA has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discriminationthroughtheutilizationofitspastCapitalfundsandtheproperapplication ofourpublichousingpolicies.

We are continuing to address public housing vacancies very aggressively and our PHAS/SEMAP scores indicate that other operational issues are being positively addressed.

Capitalfundshavebeenutilizedtoprovidemodernizationofourpropertyandour FY2002applicationwillcontinuethateffort.

PHAhasimplementedlocalpreferencestoimprovethe livingenvironmentinadditionto ourmodernizationefforts

The implementation of a family pet policy has provided the opportunity for residents to enjoy pets within a regulated environment. In addition, PHA has implemented a Community Service program beginning July 1, 2001 that was discussed with residents andeachadultmemberofeveryhouseholdhasbeennotifiedoftheirresponsibilitiesand thepolicyhasbeenBoardapproved. However, this program has been suspended for FY 02perHUDinstructions.

WeareconfidentthatthePHAwillbeabletocontinuetomeetandaccommodateallour goalsandobjectivesforFY2002.

## Attachment J: PHA's Policy on Pet Ownership in Public Housing Family Developments

### PET POLICY FOR FAMILY DEVELOPMENTS

In compliance with Section 526 of The Quality Housing and Work Responsibility Act of 1998, PHA residents shall be permitted to own and keep common household pets. Animals that are an auxiliary for persons with a disability are excluded from this policy. The ownership of common household pets is subject to the following rules and limitations:

1. Common household pets shall be defined as "domesticated animals such as a dog, cat, bird, rodent, fish or turtle". Common household pets are defined as follows:

Bird	Includes Canary, Parakeet, Finch and other species that are normally kept caged; birds of prey are not permitted.								
Fish	In tanks or aquariums, not to exceed twenty (20) gallons in capacity; poisonous or dangerous fish are not permitted.								
Dogs	Dogs not to exceed twenty-five pounds (25 lbs.) weight, or fifteen (15) inches in height at full growth. Dogs must be spayed or neutered. Veterinarian's recommended /suggested types of dogs are as follows: <table border="0" style="margin-left: 40px;"><tr><td>a. Chihuahua</td><td>e. Cocker Spaniel</td></tr><tr><td>b. Pekingese</td><td>f. Dachshund</td></tr><tr><td>c. Poodle</td><td>g. Terriers</td></tr><tr><td>d. Schnauzer</td><td></td></tr></table>	a. Chihuahua	e. Cocker Spaniel	b. Pekingese	f. Dachshund	c. Poodle	g. Terriers	d. Schnauzer	
a. Chihuahua	e. Cocker Spaniel								
b. Pekingese	f. Dachshund								
c. Poodle	g. Terriers								
d. Schnauzer									
<b>NO PIT BULLS WILL BE PERMITTED</b>									
Cats	Cats must be spayed or neutered and be de-clawed or have scratching post, and should not exceed fifteen pounds (15 lbs.).								
Rodents	Rodents other than hamsters, gerbils, white rats or mice are not considered common household pets. These animals must be kept in appropriate cages.								
Reptiles	Reptiles other than turtles or small lizards such as chameleons are not considered common household pets.								
Exotic Pets	At no time will the PHA approve of exotic pets, such as snakes, monkeys, game pets, etc.								
2. No more than one (1) dog or cat shall be permitted in a household. In the case of birds, a maximum of two birds may be permitted. There shall be no limit as to the number of fish, but no more than one aquarium with a maximum capacity of twenty (20) gallons shall be permitted. A Resident with a dog or cat may also have other categories of "common household pets" as defined above.
3. Pets other than a dog or cat shall be confined to an appropriate cage or container. Such a pet may be removed from its cage while inside the owner's housing unit for the purpose of handling, but shall not generally be unrestrained.
4. Only one (1) dog or cat is allowed per household. **NO PIT BULLS WILL BE PERMITTED.** All dogs and cats will need to be on a leash, tied up, or otherwise restrained at all times when they are outside. Neither dogs nor cats shall be permitted to run loose.



5. Pet owners shall maintain their pet in such a manner as to prevent any damage to their unit, yard or common areas of the community in which they live. The animal shall be maintained so as not to be a nuisance or a threat to the health or safety of neighbors, PHA employees, or the public, by reason of noise, unpleasant odors or other objectionable situations.
6. Each pet owner shall be fully responsible for the care of the pet, including proper disposal of pet wastes in a safe and sanitary manner. Specific instructions for pet waste shall be available in the management office. Improper disposal of pet waste is a lease violation and may be grounds for termination.
7. All pets shall be inoculated and licensed in accordance with applicable state and local laws. All cats or dogs shall be neutered or spayed, unless a veterinarian certifies that the spaying or neutering would be inappropriate or unnecessary (because of health, age, etc.).
8. Visiting pets may be allowed as long as they generally conform to the guidelines expressed in this policy, except that, no additional pet deposit shall be required of the Resident with whom the pet is visiting unless the visit is in excess of seventy-two (72) hours, and two (2) verified complaints shall be grounds for excluding the pet from further visits.
9. All pets shall be registered with the Management Office immediately or no longer than ten (10) days following their introduction to the community. Registration shall consist of providing:
  - a. Basic information about the pet (type, age, description, name, etc.);
  - b. Proof of inoculation and licensing;
  - c. Proof of neutering or spaying. All female dogs over the age of six (6) months and female cats over the age of five (5) months must be spayed. All male dogs over the age of eight (8) months and all male cats over the age of ten (10) months must be neutered. If health problems prevent such spaying or neutering, a veterinarian's certificate will be necessary to allow the pet to become or continue to be a Resident of the community;

Type of Pet	Pets Name	Inoculations (type and date)
License Date	Spay or Neuter Date	

- d. Payment of a pet deposit of \$\_\_\_\_\_ (to be paid in full, or over a period of time not to exceed six (6) months, in case of hardship) to defray the cost of potential damage done by the pet to the unit or to common areas of the community. There shall be no pet deposit for pets other than dogs or cats. The pet deposit shall not preclude charges to a Resident for repair of damages done on an ongoing basis by a pet. The Resident is responsible for all damages caused by the pet and will reimburse the Authority for all costs it incurs in repairing such damages. This deposit is refundable with accrued interest if no damage is identified at the move-out inspection; and
- e. If a Resident cannot care for their pet due to an illness, absence, or death, and no other person can be found to care for the pet, after twenty-four (24) hours have elapsed, the Resident hereby gives permission for the pet to be released to the Humane Society/Animal Control, in accordance with their procedures. In no case shall PHA incur any costs or liability for the care of a pet placed in the care of another individual or agency under this procedure.

Provide the name, address and phone number of one or more persons who will care for the pet if you are unable to do so.			
<b>Name</b>	<b>Address</b>	<b>Phone (day)</b>	<b>Phone (night)</b>
This information will be updated annually.			

10. Any litigation resulting from actions by pets shall be the sole responsibility of the pet owner. The pet owner agrees to indemnify and hold harmless the PHA from all claims, causes of action damages or expenses, including attorney's fees, resulting from the action or the activities of his or her pet. The PHA accepts NO RESPONSIBILITY for the pet under any circumstance. The PHA strongly advises resident to obtain liability insurance.

## **AttachmentK:**

### **ImplementationofPublicHousingResidentCommunityServiceRequirement**

The Yonkers Municipal Housing Authority's policy is designed to identify which adult family members are subject to or exempt from the service requirements; to explain how the PHA will administer its program; to identify PHA and/or third party certification opportunities available to eligible adult family members; and to assure resident compliance with identified work activities with fair and equitable actions.

#### **PHA Responsibilities**

##### **(1) Eligibility Determination**

The PHA will review every existing resident file to determine each Adult member's status regarding community service per the following guidelines.

- a. As family status is determined a registered letter or other certifiable document of receipt will be sent to each adult member of that family to notify them of their status (exempt or non-exempt) and explaining the steps they should immediately proceed with through their housing representative.
- b. The PHA will include a copy of the general information section of its Community Service Policy and a listing of PHA and/or third party work activities that are eligible for certification of the community service requirement.
- c. At the scheduled meeting with each non-exempt adult family member, not only will the parameters of the community service requirement be reviewed but also the PHA and/or third party work activities will be identified and selected for compliance with the annual obligation for certification at their annual lease renewal date.

##### **(2) Work Activity Opportunities**

The Yonkers Municipal Housing Authority has elected to provide to those adult family members that must perform community service activities the opportunity to select either PHA sanctioned work activities or Third Party certifiable work items. The administration of the certification process would be:

- a. **PHA Provided Activities.**  
When qualifying activities are provided by the Authority directly, designated Authority employee(s) shall provide signed certification that the family member has performed the proper number of hours for the selected service activities.
- b. **Third Party Certification**  
When qualifying activities are administered by any organization other than PHA, the family member must provide signed certification (see III A (c)) to the Authority by such third party organization that said family member has performed appropriate service activities for the required hours.
- c. **Verification of Compliance.**  
The Authority is required to review family compliance with service requirement, and must verify such compliance annually at least thirty (30) days before the end of the twelve (12) month lease term (annual re-certification time). Evidence of service performance and/or exemption must be maintained in the participant files.

d. Notice of Noncompliance.

If the Authority determines that, a family member who is subject to fulfilling a service requirement, but who has violated the family's obligation (a noncompliant resident) the Authority must notify the specific family member of this determination.

The Notice of Noncompliance must:

Briefly, describe the noncompliance (inadequate number of hours).

State that the Authority will not renew the lease at the end of the twelve (12) month lease term unless:

The resident or any other noncompliant adult family member enters into a written agreement with the Authority to cure the noncompliance and in fact perform to the letter of agreement.

- Or -

The family provides written assurance satisfactory, to the PHA that the resident or other noncompliant adult family member no longer resides in the unit.

This Notice of Noncompliance must also state that the resident may request a grievance hearing and that the resident may exercise any available judicial remedy to seek timely redress for the Authority's non-renewal of the lease because of a noncompliance determination.

Resident agreement to comply with the service requirement.

The written agreement entered into with the Authority to cure the service requirement noncompliance by the resident and any other adult family member must:

1. Agree to complete additional service hours needed to make up the total number of hours required over the twelve (12) month term of the new lease.
2. State that all other members of the family subject to the service requirement are in current compliance with the service requirement or are no longer residing in the unit.

f. The Yonkers Municipal Housing Authority has developed a list of Agency certifiable and/or third party work activities of which each non-exempt adult family member can select to perform their individual service requirement.

## AttachmentL:

### Component3,(6)DeconcentrationandIncomeMixing

- a. ☒ Yes ☐ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b. ☐ Yes ☐ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name :	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]
NY3 -11	142	Development is subject to consent decree and admission plan mandated by court action	
NY3 -13	84	Development is subject to consent decree and admission plan mandated by court action	

AttachmentM:

**Component10(B)VoluntaryConversionInitialAssessments**

- a. HowmanyofthePHA'sdevelopmentsaresubjecttotheRequiredInitialAssessments?  
Seven
- b. Howman yofthePHA'sdevelopmentsarenotsubjecttotheRequiredInitialAssessmentsbasedon exemptions(e.g.,elderlyand/ordisableddevelopmentsnotgeneraloccupancyprojects)?  
Seven
- c. HowmanyAssessmentswereconductedforthePHA'scovereddevelopments?  
Oneforeachdevelopment,atotalofsevendependments.
- d. IdentifyPHAdependments thatmaybeappropriateforconversionbasedontheRequiredInitial Assessments:  
None

DevelopmentName	NumberofUnits

- a. IfthePHAhasnotcompleted theRequiredInitialAssessments,describethestatusofthese assessments:  
N/A

AttachmentN:

<b>AnnualStatement/PerformanceandEvaluationReport</b> <b>CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary</b>					
PHAName:YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-01 ReplacementHousingFactorGrantNo:			FederalFYofGrant: 2001
<input type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input checked="" type="checkbox"/> RevisedAnnualStatement(revisionno: 1) <input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding:12/31/01 <input type="checkbox"/> FinalPerformanceandEvaluationReport					
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations	638,129	638,129	0	0
3	1408ManagementImprovementsSoftCosts	3,700,000	3,400,000	3,400,000	0
	M anagementImprovementsHardCosts				
4	1410Administration	500,000	500,000	500,000	0
5	1411Audit				
6	1415LiquidatedDamages				
7	1430FeesandCosts	100,000	100,000	100,000	0
8	1440SiteAcquisition				
9	1450SiteImprovement	500,000	0	0	0
10	1460DwellingStructures	1,075,000	1,875,000	200,000	0
11	1465.1DwellingEquipment —Nonexpendable				
12	1470NondwellingStructures				
13	1475NondwellingEquipment	65,000	65,000	0	0
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1RelocationCosts				
18	1499DevelopmentActivities				
19	1502Contingency				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b> Yonkers Municipal Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: NY36P003501-01 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2001
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	6,578,129	6,578,129	4,200,000	0
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs	3,600,000	3,600,000	3,600,000	0
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-01 ReplacementHousingFactorGrantNo:					FederalFYofGrant: 2001		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
NY3 -2B LoehrCt.	A.Combine2studio'sinto1one - bedroomapartment		1460	48	480,000	360,000	200,000	0	Completeby 6/05
	<b>Subtotal</b>				<b>480,000</b>	<b>360,000</b>	<b>200,000</b>	<b>0</b>	
NY3 -3 Scholbohm	A.Asbestosremoval		1460	8bldgs	0	350,000	0	0	Completeby 6/05
	B.Installpipecoverings		1460	LS	0	100,000	0	0	Completeby 6/05
	<b>Subtotal</b>				<b>0</b>	<b>450,000</b>	<b>0</b>	<b>0</b>	
NY3 -4 WalshRoad	A.Combine3unitsinto2one -bedroom apartments		1460	2	25,000	30,000	0	0	Completeby 6/05
	<b>Subtotal</b>				<b>25,000</b>	<b>30,000</b>	<b>0</b>	<b>0</b>	
NY3 -5 CalganoHomes	A.Replaceelevatordoors		1460	56EA	150,000	500,000	0	0	Completeby 6/05
	<b>Subtotal</b>				<b>150,000</b>	<b>500,000</b>	<b>0</b>	<b>0</b>	
NY3 -7 FlynnManor	A.Combine2studio'sinto1one - bedroomapartment		1460	2	20,000	40,000	0	0	Completeby 6/05
	<b>Subtotal</b>				<b>20,000</b>	<b>40,000</b>	<b>0</b>	<b>0</b>	
NY3 -9	A.Installironfencing		1450	5000LF	500,000	0	0	0	Delete

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority			GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-01 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2001		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
CottagePlace									
	B.Replacevestibuledoorsandintercom		1460	14bldgs	400,000	0	0	0	Movedto FY00
	C.Asbestosremoval		1460	13bldgs	0	350,000	0	0	Completeby 6/05
	D.Installpipeinsulation		1460	LS	0	100,000	0	0	Completeby 6/05
	E.Capchimneystacks		1460	14bldgs	0	45,000	0	0	Completeby 6/05
	<b>Subtotal</b>				<b>900,000</b>	<b>495,000</b>	<b>0</b>	<b>0</b>	
HA-Wide Nondwelling equipment	A.Replacemaintenancevan		1475	1EA	20,000	20,000	0	0	Completeby 6/05
	B.Replacedumptruck		1475	1EA	45,000	45,000	0	0	Completeby 6/05
	<b>Subtotal</b>				<b>65,000</b>	<b>65,000</b>	<b>0</b>	<b>0</b>	
HA-Wide Operations	A.HousingOperation		1406	10%	638,129	638,129	0	0	Completeby 6/05
	<b>Subtotal</b>				<b>638,129</b>	<b>638,129</b>	<b>0</b>	<b>0</b>	
HAWide Management	A.Providecomputertraining		1408	50%	30,000	30,000	30,000	0	Completeby 6/05

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-01 ReplacementHousingFactorGrantNo:					FederalFYofGrant: 2001		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
Improvements									
	B.Provideresidentbusiness opportunities		1408	5	40,000	40,000	40,000	0	Completeby 6/05
	C.ContinueSecurity		1408	100%	3,600,000	3,300,000	3,300,000	0	Completeby 6/05
	D.Maintenancetraining		1408	5	15,000	15,000	15,000	0	Completeby 6/05
	E.Administrativetraining		1408	10	15,000	15,000	15,000	0	Completeby 6/05
	<b>Subtotal</b>				<b>3,700,000</b>	<b>3,400,000</b>	<b>3,400,000</b>	<b>0</b>	
HAWide Administrative Cost	A.FundsfortheIntake OrientationEmployee: Salary -\$38,000 Benefits -\$12,000		1410	1	50,000	50,000	50,000	0	Completeby 6/05
	B.Fundsfor: MODCoordinator -\$52,000 Inspector -\$35,000 Clerk -\$25,000 Benefits -\$33,600		1410	3	145,600	145,600	145,600	0	Completeby 6/05
	C.Fundsfor: ExistingHAstaffinvolvedinCGP Activities		1410	4	304,400	304,400	304,400	0	Completeby 6/05
	<b>Subtotal</b>				<b>500,000</b>	<b>500,000</b>	<b>500,000</b>	<b>0</b>	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-01 ReplacementHousingFactorGrantNo:					FederalFYofGrant: 2001		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
HA-Wide Fees&Cost	A.A/Edesign		1430	100%	100,000	100,000	100,000	0	Completeby 6/05
	<b>Subtotal</b>				<b>100,000</b>	<b>100,000</b>	<b>100,000</b>	<b>0</b>	
	<b>GrandTotal</b>				<b>6,578,129</b>	<b>6,578,129</b>	<b>4,200,000</b>	<b>0</b>	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

PHAName: YonkersMunicipalHousing Authority			GrantTypeandNumber CapitalFundProgramNo: NY36P003501-01 ReplacementHousingFactorNo:				FederalFYofGrant: 2001
DevelopmentNumber Name/HA-Wide Activities	AllFundObligated (QuarterEndingDate)			AllFundsExpended (QuarterEndingDate)			ReasonsforRevisedTargetDates
	Original	Revised	Actual	Original	Revised	Actual	
NY3 -2B LoehrCt.	6/30/03			6/30/05			
NY3 -4 WalshRd.	6/30/03			6/30/05			
NY3 -5 CalganoHomes	6/30/03			6/30/05			
NY3 -7 FlynnManor	6/30/03			6/30/05			
NY3 -9 CottagePlace	6/30/03			6/30/05			
HA-Wide	6/30/03			6/30/05			

AttachmentO:

<b>AnnualStatement/PerformanceandEvaluationReport</b> <b>CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)Part1:Summary</b>					
PHAName:YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-00 ReplacementHousingFactorGrantNo:			FederalFYofGrant: 2000
<input type="checkbox"/> OriginalAnnualStatement <input type="checkbox"/> ReserveforDisasters/Emergencies <input checked="" type="checkbox"/> RevisedAnnualStatement (revisionno: 1) <input checked="" type="checkbox"/> PerformanceandEvaluationReportforPeriodEnding:12/31/01 <input type="checkbox"/> FinalPerformanceandEvaluationReport					
Line No.	SummarybyDevelopmentAccount	TotalEstimatedCost		TotalActualCost	
		Original	Revised	Obligated	Expended
1	Totalnon -CFPFunds				
2	1406Operations				
3	1408ManagementImprovementsSoftCosts	3,700,000	3,700,000	3,700,000	0
	ManagementImprovementsHardCosts				
4	1410Administration	500,000	500,000	500,000	474,646
5	1411Audit				
6	1415LiquidatedDamages				
7	1430FeesandCosts	100,000	100,000	100,000	0
8	1440SiteAcquisition				
9	1450SiteImprovement	0	10,000	10,000	0
10	1460DwellingStructures	2,131,986	2,097,151	2,097,151	1,458,101
11	1465.1DwellingEquipment —Nonexpendable				
12	1470NondwellingStructures	0	20,000	20,000	20,000
13	1475NondwellingEquipment	0	4,835	4,835	3,020
14	1485Demolition				
15	1490ReplacementReserve				
16	1492MovingtoWorkDemonstration				
17	1495.1Relocatio nCosts				
18	1499DevelopmentActivities				
19	1502Contingency				
	AmountofAnnualGrant:(sumoflines.....)	6,431,986	6,431,986	6,431,986	1,955,767
	AmountofflineXXRelatedtoLBPAactivities				

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
PHAName: Yonkers Municipal Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P003501-00 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2000</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security --Soft Costs				
	Amount of Line XX related to Security --Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority			GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-00 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2000		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
NY3 -1 MulfordGardens	A.Beginapartmentelectricalupgrade		1460	300units	836,660	0	0	0	Delete
	B.Upgradeheatingsystem		1460	1sys	0	91,768	91,768	91,768	Completed
	C.Plumbingupgrade		1460	3units	0	2,035	2,035	2,035	Completed
	D.Replaceflooringtile		1460	5units	0	13,128	13,128	13,128	Completed
	<b>Subtotal</b>				<b>836,660</b>	<b>106,931</b>	<b>106,931</b>	<b>106,931</b>	
NY3 -2A HallHomes	A.Replaceradiatorvalves		1460		0	15,000	15,000	0	Completeby 9/03
	<b>Subtotal</b>				<b>0</b>	<b>15,000</b>	<b>15,000</b>	<b>0</b>	
NY3 -2B LoehrCt.	A.Upgradeheatingsystem		1460		0	800,267	800,267	648,433	Completeby 9/03
	B.Replaceradiatorvalves		1460		0	30,185	30,185	0	Completeby 9/03
	<b>Subtotal</b>				<b>0</b>	<b>830,452</b>	<b>830,452</b>	<b>648,433</b>	
NY3 -3	A.Replacebuilt -uproofs		1460	8bldg	745,326	0	0	0	Delete



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority			GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-00 ReplacementHousingFactorGrantNo:				FederalFYofGrant: 2000		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
Schlobohm									
	B.Removeandreplacepipecoverings		1460	8bldg	300,000	0	0	0	Delete
	C.Upgradeheatingsystem		1460	8bldg	0	84,810	84,810	84,810	Completed
	D.Plumbingupgrade		1460	2units	0	3,282	3,282	3,282	Completed
	E.Replacekitchencabinets		1460	2units	0	3,510	3,510	3,510	Completed
	F.Replaceflooringtile		1460	6units	0	16,669	16,669	16,669	Completed
	G.Retubeboilers		1460	3	0	60,000	60,000	0	Completeby 9/03
	H.Maint.&Rentalofficeupgrade		1470	2ofc	0	3,076	3,076	3,076	Completed
	<b>Subtotal</b>				<b>1,045,326</b>	<b>171,347</b>	<b>171,347</b>	<b>111,347</b>	
NY3 -4 WalshHomes	A.Upgradeheatingsystem		1460	1bldg	0	24,327	24,327	24,327	Completed
	B.Plumbingupgrade		1460	2units	0	1,085	1,085	1,085	Completed
	C.Windowsreplacement		1460	5units	0	2,946	2,946	2,946	Completed
	D.Replaceflooringtile		1460	2units	0	4,376	4,376	4,376	Completed
	E.Replaceoilpumpset		1460	1set	0	16,000	16,000	0	Completeby 9/03
	F.Repaveparkinglot		1450	500sy	0	10,000	10,000	0	Completeby 9/03
	G.Renovatecommunityroom		1470	LS	0	7,128	7,128	7,128	Completed
	<b>Subtotal</b>				<b>0</b>	<b>65,862</b>	<b>65,862</b>	<b>39,862</b>	
NY3 -5 CalcagnoHomes	A.Upgradeheatingsystem		1460	2bldgs	0	58,334	58,334	58,334	Completed

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-00 ReplacementHousingFactorGrantNo:					FederalFYofGrant: 2000		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
	B.Replaceroofing		1460	3bldgs	0	162,049	162,049	124,404	Completeby 9/03
	C.Replaceflooringtile		1460	9units	0	20,533	20,533	20,533	Completed
	D.Replaceoilburners		1460	3sets	0	136,000	136,000	0	Completeby 9/03
	E.Replaceentrydoors		1460	3bldgs	0	75,000	75,000	0	Completeby 9/03
	F.Gymimprovements		1470	LS	0	3,437	3,437	3,437	Completed
	<b>Subtotal</b>				<b>0</b>	<b>455,353</b>	<b>455,353</b>	<b>206,708</b>	
NY3 -6A CurrantCt.	A.Upgradeheatingsystem		1460	1sys	0	4,406	4,406	4,406	Completed
	B.Replaceroofing		1460	1bldg	0	22,866	22,866	22,866	Completed
	C.Communityroomrenovation		1470	LS	0	6,359	6,359	6,359	Completed
	D.Maintenancetools		1475	LS	0	3,012	3,012	3,012	Completed
	<b>Subtotal</b>				<b>0</b>	<b>36,643</b>	<b>36,643</b>	<b>36,643</b>	
NY3 -9 CottagePlace	A.Upgradeheatingsystem		1460	1bldg	0	16,659	16,659	16,659	Completed
	B.Unitelectricalupgrade		1460	3units	0	6,200	6,200	6,200	Completed

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-00 ReplacementHousingFactorGrantNo:					FederalFYofGrant: 2000		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
	C.Replaceflooringtile		1460	2units	0	4,692	4,692	4,692	Completed
	D.Replaceentrydoorsystem		1460		0	272,600	272,600	259,214	Completeby 9/03
	E.Replacebasementdoors		1460		0	55,500	55,500	0	Completeby 9/03
	F.Replacestairwellhandrails		1460		0	33,500	33,500	0	Completeby 9/03
	G.Replaceheattimerpanels		1460		0	10,000	10,000	0	Completeby 9/03
	H.Retubeboilers		1460	2	0	20,000	20,000	0	Completeby 9/03
	I.Hydraulictailgate&saltspreader		1475	1	0	1,815	1,815	0	Completeby 9/03
	<b>Subtotal</b>				<b>0</b>	<b>420,966</b>	<b>420,966</b>	<b>286,765</b>	
NY3 -10A MartinelliManor	A.Replaceroofing		1460	1bldg	125,000	3,440	3,440	3,440	Completed
	<b>Subtotal</b>				<b>125,000</b>	<b>3,440</b>	<b>3,440</b>	<b>3,440</b>	
NY3 -10B TroyManor	A.Replaceroofing		1460	1bldg	125,000	4,646	4,646	4,646	Completed
	B.Windowreplacements		1460	4units	0	6,650	6,650	6,650	Completed
	<b>Subtotal</b>				<b>125,000</b>	<b>11,296</b>	<b>11,296</b>	<b>11,296</b>	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-00 ReplacementHousingFactorGrantNo:					FederalFYofGrant: 2000		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
NY3 -11 ScatteredSites	A.Replaceroofing		1460	1bldg	0	3,146	3,146	3,146	Completed
	B.Replacekitchencabinets		1460	7units	0	16,436	16,436	16,436	Completed
	C.Replacetileflooring		1460	4units	0	10,114	10,114	10,114	Completed
	<b>Subtotal</b>				<b>0</b>	<b>29,696</b>	<b>29,696</b>	<b>29,696</b>	
HAWide Management Improvements	A.Providecomputertraining		1408	50%	30,000	30,000	30,000	0	Completeby 9/03
	B.Provideresidentbusiness opportunities		1408	5	40,000	40,000	40,000	0	Completeby 9/03
	C.ContinueSecurity		1408	100%	3,600,000	3,600,000	3,600,000	0	Completeby 9/03
	D.Maintenancetraining		1408	5	15,000	15,000	15,000	0	Completeby 9/03
	E.Administrativetraining		1408	10	15,000	15,000	15,000	0	Completeby 9/03
	<b>Subtotal</b>				<b>3,700,000</b>	<b>3,700,000</b>	<b>3,700,000</b>	<b>0</b>	
HAWide Administrative Cost	A.FundsfortheIntake OrientationEmployee: Salary -\$38,000 Benefits -\$12,000		1410	1	50,000	50,000	50,000	24,646	Completeby 9/03
	B.Fundsfor:		1410	3	145,600	145,600	145,600	145,600	Completed

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHAName: YonkersMunicipalHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NY36P003501-00 ReplacementHousingFactorGrantNo:					FederalFYofGrant: 2000		
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev. Acct No.	Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
	MODCoordinator -\$52,000 Inspector -\$35,000 Clerk -\$25,000 Benefits -\$33,600								
	C.Fundsfor: ExistingHAstaffinvolvedinCGP Activities		1410	4	304,400	304,400	304,400	304,400	Completed
	<b>Subtotal</b>				<b>500,000</b>	<b>500,000</b>	<b>500,000</b>	<b>474,646</b>	
HA-Wide Fees&Cost	A.A/Edesign		1430	100%	100,000	100,000	100,000	0	Completeby 9/03
	<b>Subtotal</b>				<b>100,000</b>	<b>100,000</b>	<b>100,000</b>	<b>0</b>	
	<b>GrandTotal</b>				<b>6,431,986</b>	<b>6,431,986</b>	<b>6,431,986</b>	<b>1,955,767</b>	

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: <b>Yonkers Municipal Housing Authority</b>			Grant Type and Number Capital Fund Program No: <b>NY36P003501-00</b> Replacement Housing Factor No:			Federal FY of Grant: <b>2000</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
NY3 -1 Mulford Gardens	3/31/02	12/31/01	12/31/01	9/30/03			
NY3 -3 Schlobohm	3/31/02	12/31/01	12/31/01	9/30/03			
NY3 -10A Martinelli Manor	3/31/02	12/31/01	12/31/01	9/30/03			
NY3 -10B Troy Manor	3/31/02	12/31/01	12/31/01	9/30/03			
HA-Wide	3/31/02	12/31/01	12/31/01	9/30/03			

**Annual Statement/Performance  
and Evaluation Report**

**Part I: Summary**

Comprehensive Grant Program (CGP)

**U.S. Department of Housing  
and Urban Development**

Office of Public and Indian Housing

OMB approval No. 2577-0157 (Exp. 7/31/98)

HA Name <b>Yonkers Municipal Housing Authority</b>				Comp Grant Number <b>NY36P003708-99</b>	FFY of Grant Approval <b>1999</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement/Revision Number <u>3</u> <input type="checkbox"/> Final Performance & Evaluation Report <input checked="" type="checkbox"/> Performance & Evaluation Report for Program Year Ending 12/31/01					
Line #	Summary by Development Accounts	Total Estimated Cost		Total Actual Cost (2)	
		Original	Revised (1)	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 19)				
3	1408 Management Improvements	3,063,021	3,090,494	3,090,494	2,692,908
4	1410 Administration	500,000	500,000	500,000	500,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Cost	355,000	354,900	354,900	354,900
8	1440 Site Acquisition				
9	1450 Site Improvement	495,000	171,489	171,489	171,489
10	1460 Dwelling Structures	2,220,000	2,429,797	2,429,797	2,214,821
11	1465.1 Dwelling Equipment-Nonexpendable	162,000	248,341	248,341	218,601
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserves				
16	1495.1 Relocation Costs				
17	1498 Mod Used for Development				
18	1502 Contingency (may not exceed 8% of line 19)				
19	<b>Amount of Annual Grant (Sum of lines 2-18)</b>	6,795,021	6,795,021	6,795,021	6,152,719
20	Amount of Line 19 related to LBP Activities				
21	Amount of Line 19 related to Section 504 Compliance				
22	Amount of Line 19 related to Security				
23	Amount of Line 19 related to Energy Conservation Measures				
(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement      (2) To be completed for the Performance & Evaluation Report					
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date		
X			X		





**Annual Statement/Performance  
and Evaluation Report  
Part II: Supporting Pages**

**U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing**

Comprehensive Grant Program (CGP)

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b><u>NY 3-1</u></b>								
<b>Mulford Gardens</b>	A. Patch, paint hallway & repair door hardware	1460	12	135,072	175,213	175,213	135,072	complete by 6/02
	B. Install protective covers on steam lines and replace traps.	1460	551 ea	247,604	247,604	247,604	247,604	completed
	C. Install fencing & handrails	1450	LS	40,000	35,925	35,925	35,925	completed
	D. Replace appliances	1465.1	42 ea	32,750	40,750	40,750	34,210	complete by 6/02
	E. Upgrade boiler system	1460	LS	77,404	88,433	88,433	83,336	completed
	F. Replace floor tiles	1460	LS	13,812	13,812	13,812	13,812	completed
	<b>Subtotal</b>			<b>546,642</b>	<b>601,737</b>	<b>601,737</b>	<b>549,959</b>	
<b><u>NY 3-2A</u></b>								
<b>Hall Homes</b>	A. Upgrade heating system	1460	LS	9,115	13,030	13,030	9,115	complete by 6/02
	<b>Subtotal</b>			<b>9,115</b>	<b>13,030</b>	<b>13,030</b>	<b>9,115</b>	
<b><u>NY 3-2B</u></b>								
<b>Loehr Court</b>	A. Replace heating boilers and domestic water heaters	1460	LS	134,684	104,637	104,637	100,694	complete by 6/02
	B. Replace appliances	1465.1	30 ea	12,964	21,250	21,250	21,250	completed
	<b>Subtotal</b>			<b>147,648</b>	<b>125,887</b>	<b>125,887</b>	<b>121,944</b>	
<b><u>NY 3-3</u></b>								
<b>Schlobohm</b>	A. Patch and paint hallway	1460	12	80,612	121,601	121,601	80,612	complete by 6/02
	B. Install protective covers on steam lines and replace traps.	1460	411 ea	284,925	284,925	284,925	284,925	completed
	C. Replace elevator doors	1460	22 EA	204,673	219,998	219,998	219,998	completed
	D. Replace appliances	1465.1	21 ea	24,018	25,159	25,159	25,159	completed
	E. Install security fencing	1450	120 LF	11,852	11,852	11,852	11,852	completed
	F. Upgrade heating system	1460	LS	92,794	111,517	111,517	99,448	complete by 6/02
	G. Upgrade playgrounds	1450	LS	0	5,000	5,000	5,000	completed
	<b>Subtotal</b>			<b>698,874</b>	<b>780,052</b>	<b>780,052</b>	<b>726,994</b>	

(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement

(2) To be completed for the Performance & Evaluation Report

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Program Administrator and Date



**Annual Statement/Performance  
and Evaluation Report**

**Part II: Supporting Pages**

Comprehensive Grant Program (CGP)

**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b><u>NY 3-4</u></b> <b>Walsh Homes</b>	A. Patch and paint hallway	1460	12	53,385	53,385	53,385	53,385	completed
	B. Replace appliances	1465.1	25 ea	10,518	39,375	39,375	39,375	completed
	C. Upgrade heating system	1460	LS	73,044	85,045	85,045	73,044	complete by 6/02
	D. Replace floor tiles	1460	850 SF	4,250	4,250	4,250	4,250	complete by 6/02
	<b>Subtotal</b>			<b>141,197</b>	<b>182,055</b>	<b>182,055</b>	<b>170,054</b>	
<b><u>NY 3-5</u></b> <b>Calcagno Homes</b>	A. Replace roofing	1460	3 bldg	61,728	61,728	61,728	61,728	complete by 6/02
	B. Install protective covers on steam lines and replace traps.	1460	278 ea	273,348	280,348	280,348	273,348	complete by 6/02
	C. Replace building entry doors	1460	3 bldg.	27,274	27,274	27,274	27,274	complete by 6/02
	D. Replace appliances	1465.1	49 ea	21,232	33,859	33,859	20,659	completed
	E. Replace rear fencing	1450	120 LF	10,940	10,940	10,940	10,940	completed
	F. Upgrade boilers	1460		0	80,739	80,739	0	complete by 6/02
	G. Upgrade hotwater	1460		0	900	900	900	completed
	H. Replace sidewalks & drives	1450	1100 SF	0	5,760	5,760	5,760	completed
	<b>Subtotal</b>			<b>394,522</b>	<b>501,548</b>	<b>501,548</b>	<b>400,609</b>	
<b><u>NY 3-6A</u></b> <b>Curran Court</b>	A. Replace roofing	1460	4 bldg	97,809	97,809	97,809	97,809	completed
	B. Replace appliances	1465.1	30 ea	11,821	21,250	21,250	21,250	completed
	C. Upgrade heating system	1460	LS	4,008	4,338	4,338	4,008	complete by 6/02
	<b>Subtotal</b>			<b>113,638</b>	<b>123,397</b>	<b>123,397</b>	<b>123,067</b>	
(1) To be completed for the Performance & Evaluation Report or a Revised Annual Statement      (2) To be completed for the Performance & Evaluation Report								
Signature of Executive Director and Date					Signature of Public Housing Director/Office of Native American Program Administrator and Date			



**Annual Statement/Performance  
and Evaluation Report**

**Part II: Supporting Pages**

**Comprehensive Grant Program (CGP)**

**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b><u>NY 3-6B</u></b>	A. Replace roofing	1460	1 bldg	97,809	97,809	97,809	97,809	completed
<b>Kristensen</b>	B. Replace fencing and handrails	1450	LS	51,680	51,680	51,680	51,680	completed
	C. Upgrade heating system	1460	LS	8,294	8,294	8,294	8,294	completed
	<b>Subtotal</b>			<b>157,783</b>	<b>157,783</b>	<b>157,783</b>	<b>157,783</b>	
<b><u>NY 3-7</u></b>	A. Replace appliances	1465.1	52 ea	18,000	28,000	28,000	28,000	completed
<b>Flynn Manor</b>	B. Upgrade heating system	1460	LS	2,567	3,473	3,473	2,567	complete by 6/02
	<b>Subtotal</b>			<b>20,567</b>	<b>31,473</b>	<b>31,473</b>	<b>30,567</b>	
<b><u>NY 3-9</u></b>	A. Install fencing and handrails	1450	LS	175,000	0	0	0	Delete
<b>Cottage Place</b>	B. Install protective covers on steam lines and replace traps.	1460	256 ea	117,166	117,166	117,166	117,166	completed
	C. Landscaping	1450	LS	50,000	0	0	0	Delete
	D. Replace appliances	1465.1	61 ea	23,307	32,736	32,736	22,736	completed
	E. Upgrade exterior doors	1460		0	5,400	5,400	0	
	F. Upgrade heat sys	1460		0	2,446	2,446	0	
	G. Upgrade playground	1450	LS	0	879	879	879	completed
	<b>Subtotal</b>			<b>365,473</b>	<b>158,627</b>	<b>158,627</b>	<b>140,781</b>	
<b><u>NY 3-10A</u></b>	A. Expand parking lot	1450	LS	50,000	47,350	47,350	47,350	completed
<b>Martinelli Manor</b>	<b>Subtotal</b>			<b>50,000</b>	<b>47,350</b>	<b>47,350</b>	<b>47,350</b>	
<b><u>NY 3-10B</u></b>	A. Upgrade heating system	1460	LS	2,335	2,335	2,335	2,335	completed
<b>Troy Manor</b>	<b>Subtotal</b>			<b>2,335</b>	<b>2,335</b>	<b>2,335</b>	<b>2,335</b>	
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Comprehensive Grant Program (CGP)

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>NY 3-11 FX O'Rourke</b>	A. landscaping	1450	LS	105,528	2,103	2,103	2,103	completed
	B. Replace floor tiles	1460	3300 SF	16,862	16,862	16,862	16,862	completed
	C. Renovate kitchens	1460	9 units	46,992	46,992	46,992	46,992	completed
	D. Patch & paint interiors	1460	52 units	52,434	52,434	52,434	52,434	completed
	E. Replace appliances	1465.1	16 ea	7,390	5,962	5,962	5,962	completed
	<b>Subtotal</b>			<b>229,206</b>	<b>124,353</b>	<b>124,353</b>	<b>124,353</b>	
<b>HA-Wide Management Improvements</b>	A. Provide computer training	1408	50%	30,000	65,111	65,111	60,326	complete by 3/02
	B. Continue Security	1408	100%	3,003,021	2,976,682	2,976,682	2,588,043	complete by 3/02
	C. Maintenance training	1408	5	15,000	24,350	24,350	22,269	complete by 3/02
	D. Administrative training	1408	10	15,000	24,351	24,351	22,270	complete by 3/02
	<b>Subtotal</b>			<b>3,063,021</b>	<b>3,090,494</b>	<b>3,090,494</b>	<b>2,692,908</b>	
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**Annual Statement/Performance  
and Evaluation Report**

**Part II: Supporting Pages**

**Comprehensive Grant Program (CGP)**

**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian Housing

OMB approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b><u>HA-Wide</u> Administrative Cost</b>	A. Funds for the Intake Orientation Employee: Salary - \$38,000 Benefits - \$12,000	1410	1	50,000	50,000	50,000	50,000	completed
	B. Funds for: MOD Coordinator - \$52,000 Inspector - \$35,000 Clerk - \$25,000 Benefits - \$33,600	1410	3	145,600	145,600	145,600	145,600	completed
	C. Funds for: Existing HA staff involved in CGP Activities	1410	4	304,400	304,400	304,400	304,400	completed
	<b>Subtotal</b>			<b>500,000</b>	<b>500,000</b>	<b>500,000</b>	<b>500,000</b>	
<b><u>HA-Wide</u> Fees &amp; Cost</b>	A. A/E Services	1430	100%	155,000	109,900	109,900	109,900	completed
	B. HOPE VI Consultant	1430	100%	200,000	245,000	245,000	245,000	completed
	<b>Subtotal</b>			<b>355,000</b>	<b>354,900</b>	<b>354,900</b>	<b>354,900</b>	
	<b>Grand Total</b>			<b>6,795,021</b>	<b>6,795,021</b>	<b>6,795,021</b>	<b>6,152,719</b>	
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**Annual Statement/Performance  
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**Part III: Implementation Schedule**

**Comprehensive Grant Program (CGP)**

**U.S. Department of Housing  
and Urban Development**  
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

Development Number/Name HA Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates (2)
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
<b><u>NY 3-1</u></b> <b>Mulford Gardens</b>	3/31/2001	3/31/2001	3/31/2001	9/30/2002	6/30/2002		
<b><u>NY 3-2</u></b> <b>Hall Homes</b>	3/31/2001	6/30/2000	6/30/2000	9/30/2002	6/30/2002		
<b><u>NY 3-2 B</u></b> <b>Loehr Court</b>	3/31/2001	6/30/2000	6/30/2000	9/30/2002	6/30/2002		
<b><u>NY 3-3</u></b> <b>Schlobohm</b>	3/31/2001	6/30/2000	6/30/2000	9/30/2002	6/30/2002		
<b><u>NY 3-4</u></b> <b>Walsh Homes</b>	3/31/2001	6/30/2000	6/30/2000	9/30/2002	6/30/2002		
<b><u>NY 3-5</u></b> <b>Calcagno Homes</b>	3/31/2001	6/30/2000	6/30/2000	9/30/2002	6/30/2002		
<b><u>NY 3-6A</u></b> <b>Curran Court</b>	3/31/2001	6/30/2000	6/30/2000	9/30/2002	6/30/2002		
<b><u>NY 3-6B</u></b> <b>Kristensen</b>	3/31/2001	3/31/2001	3/31/2001	9/30/2002	6/30/2002		
<b><u>NY 3-9</u></b> <b>Cottage Place</b>	3/31/2001	6/30/2000	6/30/2000	9/30/2002	6/30/2002		
<b><u>NY 3-10</u></b> <b>Martinelli Manor</b>	3/31/2001	6/30/2000	6/30/2000	9/30/2002	6/30/2002		
<b><u>HA Wide</u></b>	3/31/2001	3/31/2001	3/31/2001	9/30/2002	6/30/2002		
<div style="display: flex; justify-content: space-between;"> <span>(1) To be completed for the Performance &amp; Evaluation Report or a Revised Annual Statement</span> <span>(2) To be completed for the Performance &amp; Evaluation Report</span> </div>							
Signature of the Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date			